

EL TEJON UNIFIED SCHOOL DISTRICT  
**EMPLOYMENT APPLICATION FOR CLASSIFIED ASSIGNMENT**

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

POSITION APPLIED FOR \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_ ARE YOU EMPLOYED NOW? \_\_\_\_\_

WHEN ARE YOU AVAILABLE FOR WORK? \_\_\_\_\_ Do you have a physical condition or handicap which may limit your ability to perform the job?  No If yes, what can be done to accommodate your limitation? \_\_\_\_\_

ARE YOU LOOKING FOR:  Full Time  Part Time  Substitute Work

CHECK ITEMS IN WHICH YOU HAVE TRAINING OR EXPERIENCE:  Typing  Shorthand  Bus Driver  
 Food Service  Carpentry  Electrical  Plumbing  Gardening List other skills and experiences not listed above which qualify you for this position: \_\_\_\_\_

OTHER LANGUAGES SPOKEN: \_\_\_\_\_

LIST SCHOOLS ATTENDED GRADUATE YES/NO MAJOR/MINOR

HIGH SCHOOL \_\_\_\_\_

COLLEGE(S) \_\_\_\_\_

TRADE/VOC. \_\_\_\_\_

WORK EXPERIENCE/REFERENCES (PLEASE LIST 3) - Begin with most recent position, list employer, phone number, address, your position, years worked, salary, reason for leaving. If you have worked at your most recent position for 7 years or longer, list three references from this employment.

PERSONAL REFERENCES - Please list name and telephone number. No Relatives

HAVE YOU EVER BEEN CONVICTED OF A CRIME/MOVING TRAFFIC VIOLATION?  NO IF YES, EXPLAIN: \_\_\_\_\_

PRIOR TO FINAL APPROVAL OF EMPLOYMENT, ALL PROSPECTIVE EMPLOYEES ARE REQUIRED TO SUBMIT TO A FINGERPRINT CHECK AND PASS A TB TEST. SOME POSITIONS ALSO REQUIRE SUCCESSFUL PASSAGE OF A PHYSICAL EXAMINATION. If employed, you will be required to furnish proof of age and citizenship.

I certify all statements made hereon are true and correct to the best of my knowledge. I understand that any false statements made on this application or omission of material facts may be cause for non-employment or dismissal if employed. I hereby give my permission for the Personnel Department of the El Tejon Unified School District to seek any and all information from my previous employers and references. I further hold harmless the School District and its employees from all liability relating to the obtaining of such information.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

REV. 4/06

Live scan date _____	Paperwork _____	Assignment _____	First day _____
----------------------	-----------------	------------------	-----------------