

Tamaroa School District #5

200 W. Main St. , P.O. Box 175
Tamaroa, IL 62888
Phone: 618-496-5513
Fax: 618-496-3911

Application for Employment

All qualified applicants will receive consideration for employment without regard to race, color, religion, gender, gender identity or expression, sexual orientation, national origin, genetics, disability, age, or veteran status.

Name: _____
Last First M.I Preferred Name

Address: _____
Street City State Zip

Telephone: _____ Email Address: _____

Position applied for: _____ Salary Desired: _____

When available for starting work? _____

I have read the job description and am able to fulfill the requirements for the position in which I am applying.

_____ Yes _____ No _____ Explanation

EDUCATION AND BACKGROUND:

| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION (Complete mailing address) | NUMBER OF YEARS COMPLETED | CERTIFICATE, DIPLOMA or MAJOR & DEGREE TYPE |
|--------------------------|----------------|--|---------------------------|---|
| High School | | | | |
| | | | | |
| College | | | | |
| | | | | |
| Business or Trade School | | | | |
| | | | | |
| Professional School | | | | |
| | | | | |

Have you ever been convicted of a crime? _____ No _____ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

MILITARY:

Have you ever been in the armed forces? _____ Yes _____ No

Are you now a member of the national guard? _____ Yes _____ No

Specialty _____ Date Entered _____ Discharge Date _____

WORK EXPERIENCE:

Please list your work experience beginning with your most recent job held.

| Name of Employer | Name of Last Supervisor |
|------------------|----------------------------------|
| Employment Dates | Reason for Leaving (Be Specific) |
| | |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

WORK EXPERIENCE (Continued)

| | |
|------------------|----------------------------------|
| Name of Employer | Name of Last Supervisor |
| Employment Dates | Reason for Leaving (Be Specific) |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

| | |
|------------------|----------------------------------|
| Name of Employer | Name of Last Supervisor |
| Employment Dates | Reason for Leaving (Be Specific) |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.

Signature

Date