

HACKBERRY ELEMENTARY SCHOOL DISTRICT NO.3  
CEDAR HILLS SCHOOL  
9501 NELLIE DRIVE, KINGMAN AZ 86401  
928.692.0013 Fax: 928.692.1075

**SUPPORT STAFF EMPLOYMENT APPLICATION**

The District does not discriminate on the basis of age, race, color, religion, sex, marital status, handicap or national origin. BOTH MALE AND FEMALE ARE URGED TO APPLY.

ACKNOWLEDGEMENT OF APPLICANT READ THIS PARAGRAPH BEFORE SIGNING THIS EMPLOYMENT APPLICATION:

- A. Every answer I have provided on this employment application is both complete and truthful. I understand and agree that:
1. If any information is omitted from or not filled in on this application, or if any false information is furnished, the District will reject my application.
  2. I will be ineligible for any future consideration for employment and may be subject to criminal prosecution, and
  3. If I am employed by the District, I may be dismissed from employment, criminally prosecuted, and if certified, my certificate may be revoked, if it is later determined that I have furnished false information on this application.

If hired, you will need to provide a copy of your Fingerprint clearance

NO QUESTION ON THIS EMPLOYMENT APPLICATION SHOULD BE ANSWERED IN SUCH A MANNER AS TO DISCLOSE RACE, COLOR, CREED, NATIONAL ORIGIN, ANCESTRY, AGE, MARITAL STATUS, SEX OR THE EXISTENCE OF ANY PHYSICAL HANDICAPS, OR MENTAL CONDITION UNRELATED TO THE PERFORMANCE OF THE POSITION FOR WHICH YOU ARE APPLYING.

PERSONAL DATA (please type or print)

Name \_\_\_\_\_

Other Names Used \_\_\_\_\_ Dates of Usage \_\_\_\_\_

\_\_\_\_\_

Home Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Position you are applying for \_\_\_\_\_

When will you be available? \_\_\_\_\_ Present Position \_\_\_\_\_

Salary \_\_\_\_\_ Reason for leaving your present position

\_\_\_\_\_  
\_\_\_\_\_

Present (or most recent) administrative supervisor(s):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been dismissed from a position? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been asked to resign from a position? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain

\_\_\_\_\_  
\_\_\_\_\_

Have you been employed by HESD#3 before? \_\_\_\_\_ When: \_\_\_\_\_

List any friends or relatives employed by HESD#3 \_\_\_\_\_

\_\_\_\_\_

**PERSONAL INFORMATION AND REFERENCES**

Give names and complete addresses of three (3) references that are familiar with your personality, character and work performance. Also be sure to include accurate phone numbers, including area code.

Name	Years Known	Official Position	Address	Phone (with area code)

**SELECTIVE SERVICE REGISTRATION:** (In compliance with Arizona HB2193)

Are you required to be registered with the Selective Service System? \_\_\_\_\_ Yes \_\_\_\_\_ No

**IMMUNIZATION RECORD INFORMATION:**

Arizona State Department of Health Services regulations (R9-6-729 and R9-6-742) require that an immunization record for each school employee be on file prior to employment. It shall be a condition of employment that the employee provide the District with proof of immunization of Rubella or Rubeola unless employee falls within one of the exceptions provided in the District policy (GBE(2)-R-Staff Health and Safety).

ALL Employees are required to take a medical test for active Infectious Pulmonary Tuberculosis.

If any of the following questions are answer is YES, attached additional information.

Are you receiving Arizona retirement? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever claimed Industrial Compensation for an injury? \_\_\_\_\_ Yes \_\_\_\_\_ No

**EDUCATION** - List name of school, years attended and graduated or not:

Elementary \_\_\_\_\_

High School \_\_\_\_\_

Other \_\_\_\_\_

**SKILLS**

Please check the skills you have acquired and/or experience you have had in the area for which you are applying for.

Cafeteria

Serving Line \_\_\_\_\_ Food Handlers Card \_\_\_\_\_ expires: \_\_\_\_\_

Food Preparation \_\_\_\_\_ Other \_\_\_\_\_

Are you allergic to any external food handling or cleaning agents? \_\_\_\_\_ yes \_\_\_\_\_ no

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Custodial

Floor/Carpet machines \_\_\_\_\_ Office Cleaning \_\_\_\_\_

Stripping/Rewaxing \_\_\_\_\_ Other \_\_\_\_\_

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Maintenance

Heating/AC \_\_\_\_\_ Painting \_\_\_\_\_

Carpentry \_\_\_\_\_ Equip. Repair \_\_\_\_\_

Electrician \_\_\_\_\_ Landscaping \_\_\_\_\_

Grounds Keeping \_\_\_\_\_ Heavy Equipment Operator \_\_\_\_\_

Other \_\_\_\_\_

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Secretarial

Typing \_\_\_\_\_ #WPM \_\_\_\_\_ Phone \_\_\_\_\_ 10 Key \_\_\_\_\_

Word Processing \_\_\_\_\_ List \_\_\_\_\_

Computers \_\_\_\_\_ List \_\_\_\_\_

Bookkeeping \_\_\_\_\_ Receptionist \_\_\_\_\_

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Teacher Assistant

Typing \_\_\_\_\_ #WPM \_\_\_\_\_ Special Education \_\_\_\_\_

Other \_\_\_\_\_

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Transportation

Bus Driver \_\_\_\_\_ AZ CDL # \_\_\_\_\_

Expiration: \_\_\_\_\_

Truck/Bus Mechanic \_\_\_\_\_

Certified \_\_\_\_\_ Other \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contact/Supervisor: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Date of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contact/Supervisor: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Date of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contact/Supervisor: \_\_\_\_\_  
Position Held: \_\_\_\_\_ Date of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date