

Alloway Township School District
P.O. Box 327, 43 Cedar Street
Alloway, N.J. 08001
(856) 935-1622
FAX: (856) 935-3017
www.allowayschool.org

Position _____ Date _____

Name _____

Address _____

Telephone Number _____

Education

School	Name and Location	Length of Time	Diploma / Degree
High School			
College/Univ.			
College/Univ.			

Work Experience

Month/Year Started	Name and Location	Nature of Position	Length of Time	Salary

Extra Curricular Experience

(Include sports or activities in which you have engaged or directed since your entrance into high school.)

Year	Place	Nature of Participation

1. Have you ever been dismissed? Yes _____ No _____
If yes, please indicate when, where, and why.

2. Have you ever been denied a contract? Yes _____ No _____
If yes, please indicate when, where, and why.

3. Would you be willing to take a physical examination prior to employment? Yes _____ No _____

Criminal History Record Check:

Have you ever been convicted of a crime, disorderly conduct, drunken driving, or participated in a pre-trial intervention program? Yes _____ No _____ If yes, please explain.

Statute, Chapter 116, P.L. 1986, states that no local board of education employ any person unless it has first been determined that no criminal record exists in the following areas: (1) sexual offenses or child molestation (NJS 2C:14-1 ET SEQ.); (2) endangering the welfare of children or incompetents (NJS 2C:24-4 and NJS 2C:24-7).

ALL CANDIDATES MUST SATISFACTORILY COMPLETE THE REQUIRED CRIMINAL HISTORY RECORD CHECK.

REFERENCES: Please name at least three people who have a definite knowledge of ability, training, and character.

Name	Address/Telephone Number	Position

May we use the above for references? Yes _____ No _____

Why do you wish to leave your present position? _____

Present salary _____ Least salary you will accept _____

When are you available? _____

Attach resume and any other pertinent information.