

Melbourne School District

P.O. Box 250
Melbourne, AR 72556
(870) 368-4500

Classified Employment Application

Do not omit any applicable item. Failure to complete the entire application may result in the rejection of your candidacy.

Last Name

First Name

Middle Name

Present Address

City

State

Zip Code

Permanent Address

City

State

Zip Code

Phone Number

Additional Phone Number Where You may be reached

Position Desired

Check all areas for which you wish to be considered

<input type="checkbox"/> Custodian	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Food Service	<input type="checkbox"/> Secretary
<input type="checkbox"/> Teacher's Aide	<input type="checkbox"/> Special Ed. Aide	<input type="checkbox"/> Office Aide	<input type="checkbox"/> School Nurse
<input type="checkbox"/> Transportation	<input type="checkbox"/> Other: (Specify) _____		

Skills

List skills that you have that support the position(s) you desire, include training, licenses, or certifications.

Education

Complete all that are applicable

<input type="checkbox"/> High School	List:	Graduated?	Date of Graduation?
<input type="checkbox"/> Vocational School	List:	Degree Awarded?	Date Awarded?
<input type="checkbox"/> College	List:	Degree Awarded or Years/Hours/Completed?	Date of Completion?

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General Information

Have you ever been convicted of a felony? Yes No

If yes, specify: _____

Are you a U.S. Citizen? Yes No

If, "No", are you an illegal alien? Yes No

Military Service

Branch of Service		Dates
Rank or Position Held		

Are you currently employed? Yes No

If yes, specify: _____

If yes, why do you wish to leave your current position to take a position at this school? _____

On what date would you be available for work? _____

References

Please list at least three persons (not relatives) for us to contact who are knowledgeable about your work.

Name, Position and Title: _____ Address _____ Phone _____

Name, Position and Title: _____ Address _____ Phone _____

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Employment History

From Month/Year	To Month/Year	Name & Address of Employer	Position Held	Phone Number

Applicant's Acknowledgement, Authorization, and Release

Please read carefully before signing

Application forms are sent to all that request them, regardless of existing vacancies. The issuance of such forms does not signify that the applicant is under consideration for employment. An application remains active for a period of one year and must be renewed following this period. If recommended for employment, a criminal background check will be required and satisfactorily completed before an applicant will be employed.

I certify that the information that I have given or will give during the entire application process is true and correct without omissions of any kind. I agree that the Melbourne School District will not be held liable in any respect if my employment is terminated because of false statements, answers or omissions that I have made on this form, or will make during any possible interviews. I authorize the Melbourne School District to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation, or governmental agency to disclose to the Melbourne School District any information regarding my employment, work habits, or personal interaction skills or traits. In consideration of the Melbourne School District's review of this application, I hereby release the District, as well as, other providers of information from any liability and for any damage that may result from the furnishing and receiving of this information. A copy of this authorization and release is valid as the original and should be recognized as such.

Applicant's Signature

Date

Social Security Number

Date of Birth

Equal Opportunity Employment

Melbourne School District is an Equal Opportunity Employer. Educational programs and activities of the Melbourne School District shall be operated in such a manner that discrimination on the basis of race, color, religion, national origin, sex, pregnancy, sexual orientation, gender identity, age, disability, or genetic information will not exist in its admission or employment practices.

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Send Application to:

**Melbourne School District
Superintendent's Office
P.O. Box 250
Melbourne, AR 72556**

For Office Use only

Date Interviewed

Interviewer

Notes: _____
