

APPLICATION FOR EMPLOYMENT – Falls City Public Schools

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap, or national origin.

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name _____
Last First Middle

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone Number _____

Referred By _____ Are you 18 years of age or older? Yes No

EMPLOYMENT DESIRED

Position _____ Date You Can Start _____ Salary Desired _____

Are You Employed Now? Yes No
 If So, May We Inquire of Your Present Employer? Yes No

Ever Applied to Falls City Public Schools Before? Yes No Where? _____ When? _____

EDUCATION	Name and Location of School	Circle Last Year Completed	Circle Did You Graduate?	Subjects Studied and Degree(s) Received
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Grammar School	_____		Yes No	

High School	_____	1 2 3 4	Yes No	

College	_____	1 2 3 4	Yes No	

Trade, Business, or Correspondence School	_____	1 2 3 4	Yes No	

GENERAL

Subjects of Special Study or Work _____

Job-Related Skills (computer, typing, driver's license, etc.) _____

Activities Other Than Religious (Civic, Athletic, etc.) _____

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, SEX, COLOR, OR NATIONAL ORIGIN OF ITS MEMBERS

FORMER EMPLOYERS List below your last four employers, starting with the last one first.

Date Month and Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

REFERENCES List below three persons not related to you, whom you have known at least one year.

Name	Address	Position	Years Acquainted
1			
2			
3			

If you are hired by Falls City Public Schools, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by Falls City Public Schools.

I understand that any employment is conditional on a background check. I authorize Falls City Public Schools to thoroughly investigate all statements contained in my application or resume, and I authorize former employers and references to disclose information regarding my former employment, character, and general reputation to Falls City Public Schools, without giving me prior notice of such disclosure. In addition, I release Falls City Public Schools, any former employers, and all references listed above from any and all claims, demands, or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or Falls City Public Schools. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon Falls City Public Schools unless made in writing.

If I am offered employment, I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by Falls City Public Schools and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to Falls City Public Schools the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug tests; and if I am hired, a condition of my employment will be that I abide by Falls City Public Schools' Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate Falls City Public Schools to hire. If hired, I agree to abide by all Falls City Public Schools' work rules, policies, and procedures. Falls City Public Schools retains the right to revise its policies or procedures, in whole or in part, at any time.

Date _____ Signature _____