APPLICATION FOR EMPLOYMENT

Please print or type all information except signature.

Non-Discrimination Policy: Pymatuning Valley School District is committed to the principle of equal opportunity in education and employment. The District does not discriminate on the basis of sex, race, color, creed, national origin, age, religion, sexual orientation, gender identity, gender expression, veteran status, or disability in admission to, access to, treatment in, or employment in its programs and activities. **GENERAL INFORMATION** Position(s) Applied For _ Referral Source ☐ Newspaper ☐ Friend ☐ Relative ☐ Employment Agency ☐ Walk-in ☐ Other Address ___ Street State Home Telephone (_____) Cell Phone () E-mail address Have you ever filed an application here before? ☐ Yes ☐ No If yes, give date ___ Have you ever been employed here before? ☐ Yes ☐ No If yes, give date _____ Are you currently employed? ☐ Yes ☐ No If yes, may we contact your employer?

Yes

No Are you a United States citizen? Yes No If no, do you have a valid work permit? Yes No (Proof of citizenship or immigration status may be required upon employment) Employment desired: Full-Time Part-Time Substitute When are you available for work? Do you have any relatives/friends employed by PV Schools? If so, who? ____ **EDUCATION** LOCATION NUMBER OF YEARS MAJOR & TYPE OF SCHOOL NAME OF SCHOOL (Complete mailing address) COMPLETED DEGREE High School College Other **COMPUTER SKILLS (Only for positions which require computer skills)** Check off those computer skills with which you are proficient (any version). ☐ PC User Windows ☐ Microsoft Word ☐ Macintosh User ☐ Microsoft Access ☐ Microsoft Publisher ☐ Web Page Design/ ☐ E-mail ☐ Internet Maintenance Other. Please list **OTHER SPECIAL SKILLS** Please list other special skills you may have, e.g., fluency in other languages, licenses, special training required for the position for which you are applying, etc.

	Yes ☐ No Expiration date	
Driver's license number	State of issue [☐ Operator ☐ Commercial (CDL) ☐ Chauffeur
Have you had any accidents during	the past three years? ☐ Yes ☐ No	How many?
Have you had any moving violations	s during the past three years Yes No	How many?
MILITARY		
Are you a veteran of the United Stat	tes military service? \square Yes \square No If yes,	what branch?
If yes, Date Entered	Date Discharged	
If yes, please describe any special s	skills or training acquired while in the service:	
WORK EXPERIENCE	gipping with your most recent job. If you work	e self-employed, give firm name. Attach additional
sheets if necessary.		
Most Recent Employer	Dates Employed From: To:	Work Performed
Address	Supervisor	
Job Title	Reason for Leaving	
Employer	Dates Employed	Work Performed
	From: To:	
Address	Supervisor	
Job Title	Reason for Leaving	
REFERENCES Please list two references other than	n relatives or previous employers.	
	Name	
Name		
Position	Position	
Name Position Company Address	Position Company	
Position Company Address	Position Company Address	
Position Company Address Telephone () I certify that the facts set forth in this	Position Company Address Telephone (application for employment are true and complete oplication shall be considered sufficient cause for) ste to the best of my knowledge. I understand that if I a
Position	Position	te to the best of my knowledge. I understand that if I are dismissal. This company is hereby authorized to make this company can terminate the employment relationships.

FOR OFFICE USE ONLY			
Date of Board Approval as:	F/T Employee	Substitute	