## PACIFIC HERITAGE ACADEMY - EMPLOYMENT APPLICATION

1755 West 1100 North Salt Lake City, UT 84116 P: 801.363.1892

Please complete all questions, marking N/A if not applicable. Attach your Resume. Your resume becomes part of this application. Applications are retained on file for one (1) year. If you require an accommodation to complete this application; or during the interview process, please notify the Human Resources Department (Business Manager). *Equal Opportunity Employer*.

| Last Name  | First Name  | M.I.                | Undergraduate Education             |                 |
|--|---|---------------------|-------------------------------------|-----------------|
| Complete Street Ado  | dress   |                     | (4) Calliana and Hadranaida Nama    |                 |
|  |   |                     | (1) College or University Name      |                 |
| City, State, Zip   |   |                     | Address, City, ST, Zip              |                 |
| ()<br>Phone Number   | ( )<br>Cell Numbe   | r                   | Dates Attended                      | Degree Received |
| E-mail Address   |   |                     | (2) College or University Name      |                 |
| If hired, can you provide proof that you are a US citizen or are legally permitted to work in the US? Yes No                 |   |                     | Address, City, ST, Zip              |                 |
| Date available to sta  | art work  |                     | Dates Attended                      | Degree Received |
| Salary Desired   |   |                     | (3) College or University Name      |                 |
| Teachers Only:  Do you hold a valid Utah Teacher's Certification? ☐ Yes ☐ No   |   |                     | Address, City, ST, Zip              |                 |
| If yes, type of certification:  Do you hold a valid Utah Administrator's Cert.? Yes No                                       |   |                     | Dates Attended                      | Degree Received |
|  | censes held or other states' lice<br>tificate in Idaho, etc.) | enses if applicable | Postgraduate Education              |                 |
|  |   |                     | (1) College or University Name      |                 |
| Please list any State Approved Endorsements  Have you ever had a Professional License suspended or revoked?  Yes No Explain: |   |                     | Address, City, ST, Zip              | -               |
| Are you proficient in:  Windows XP or 7  |   |                     | Dates Attended                      | Degree Received |
|  |   |                     | (2) College or University Name      |                 |
|  |   |                     | Address, City, ST, Zip              |                 |
| Applying for   | □ Flomontory (V. 6). □ Cocco                                  | ndary (7 12)        | Dates Attended                      | Degree Received |
| Applying for:  | ☐ Elementary (K-6) ☐ Secon<br>☐ Full Time ☐ Part '            |                     | Other Education, Training or Honors |                 |
| ☐ Teacher— List Subject(s): ☐ Teacher's Aide ☐ Other Position:   |   |                     | Published Works (include dates)     |                 |
| Hours Available  |   |                     |                                     |                 |

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| Three Person   | nal References  |   | Employment History (please list most recent position first)              |  |
|--|---|---|--|--|
| Name   |   | Relationship to You   |  |  |
|  | (   |   | (1) Employer Name Phone  |  |
| City, ST   | Phone   | Years Known   | Name & Title of Direct Supervisor May we contact this employer?  Yes  No |  |
| Name   |   | Relationship to You   | May we contact this employer:  |  |
| City, ST   | Phone (   | Years Known   | Address, City, ST, Zip   |  |
|  |   |   | Date Employed (MO/YR) from to  |  |
| Name   | (   | Relationship to You   |  |  |
| City, ST   | Phone   | Years Known   | Position (position, grades, subjects taught if education)                |  |
|  | nd agree that this appli  | cation does not guarantee employment<br>at if the school makes an employment  | Starting and Ending Salary   |  |
| specified term.  | This application does   | t a contract of employment for a<br>not create any expectation of<br>nt. I understand that the school   | Additional Compensation (Incentive Pay, Bonuses, etc.)                   |  |
| employee/emp<br>terminated by 6                        | oloyer relationship is ar<br>either party at any time                     | n at-will relationship and can be<br>e, with or without cause, and with or<br>Human Resources Department will   | Reason for Leaving (please be specific)                                  |  |
| understand tha   | it any handbooks, mani  | mpensation and/or benefits. I<br>uals, policies and procedures<br>ractual in nature, and therefore may be   | (2) Employer Name Phone  |  |
| at any time. Sh<br>terms of the scl                    | ould I become an empl<br>hool's policies, which a                         | shed at the sole discretion of the school<br>oyee of the school, I will abide by the<br>re subject to change or amendment and                           | Name & Title of Direct Supervisor May we contact this employer?  Yes  No |  |
|  | he United States, the St  | egal manner. I will, in addition, obey all<br>ate of Utah and of all localities where   | Address, City, ST, Zip   |  |
| Background Ch<br>criminal, perso                       | eck on me and to make<br>nal, social and employr                          | ne school to perform a Criminal<br>e such investigations and inquiries of my<br>ment histories; and other related<br>ng at an employment decision or to | Date Employed (MO/YR) from to  |  |
| qualify for and employers and                          | upon employment. I hany other persons from                                | ereby release the school, former n any and all liability in regards to on in connection with the schools due  | Position (position, grades, subjects taught if education)                |  |
| diligence effort paperwork. If I                       | s regarding my employ<br>am offered and choose                            | ment application and related to accept employment with the school,  | Starting and Ending Salary   |  |
| I understand I v<br>legally permitte                   | will be required to dem<br>ed to work in the Unite                        | nonstrate within three (3) days that I am d States. Failure to provide evidence of ill result in termination of employment.                             | Additional Compensation (Incentive Pay, Bonuses, etc.)                   |  |
| I certify that the                                     | e information furnishe  | d herein was completed by me and that   | Reason for Leaving (please be specific)                                  |  |
| to the best of m                                       | y knowledge. I unders   | ume (if included) are true and complete<br>tand that any omission or<br>a any record or document submitted for  | (3) Employer Name Phone  |  |
| employment w   | ill constitute grounds f  | or denial of employment or immediate  | Name & Title of Direct Supervisor  |  |
|  |   | s of the timing of discovery. v (EEO) Policy Statement  | May we contact this employer?  Yes No                                    |  |
| It is the policy                                       | of the school to pron   | note equal employment ial opportunity employer. The   | Address, City, ST, Zip   |  |
| school will not<br>applicant or et<br>origin, disabili | t discriminate, nor to<br>mployee because of r<br>ity, veteran status, ag | lerate discrimination, against any<br>ace, color, sex, religion, national<br>e, marital status, or any other group                                      | Date Employed (MO/YR) from to  |  |
| protected by land                                      |   | tifications. [ (check box).   |  |  |
|  |   |   | Position (position, grades, subjects taught if education)                |  |
| Print Name   |   | Date  | Starting and Ending Salary   |  |
| Signature  | Additional Compensation (Incentive Pay, Bonu                              |   | Additional Compensation (Incentive Pay, Bonuses, etc.)                   |  |

Reason for Leaving (please be specific)