



EMPLOYMENT APPLICATION

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 accommodations to complete this application or during the interview process, please notify the Business Manager. Equal Opportunity Employer.

Last Name _____ First Name _____ M.I. _____

Complete Street Address _____

City, State, Zip _____

Phone Number () _____ Cell Number () _____

E-mail Address _____

If hired, can you provide proof that you are a US citizen or are legally permitted to work in the US? Yes No

Date available to start work: _____

Salary/Hourly Pay Desired: _____

Are you proficient in: Windows Mac OSX
 the Internet email MS Office SIS _____

Have you been convicted of any crime, other than minor traffic violations? Yes No Have you been the subject of an Investigation or Administrative Action (licensed educators only)? Yes No Please provide details: _____

Applying for: Elementary (K-6) Secondary (7-8)
 Full Time Part Time

Teacher—List Subject(s): _____
 Teacher's Aide
 Other Position:
Hours Available: _____

Teachers Only:

Do you hold a valid Utah Teacher's Cert.? Yes No

If yes, type of certification: _____

Do you hold a valid Utah Admin's Cert.? Yes No

List other state licenses held or other states' licenses if applicable (i.e. Teaching Cert in Idaho, etc)

Please list any State Approved Endorsements

Have you ever had a Professional License suspended or revoked? Yes No Explain: _____

Undergraduate Education

(1) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

(2) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

(3) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

Postgraduate Education

(1) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

(2) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

(3) College or University Name _____
Address, City, ST, Zip _____
Dates Attended _____ Degree Received _____

Other Education, Training or Honors: _____

Published Works (include dates): _____

Three Personal References

_____		_____
Name		Relationship to You
_____ (____) _____		
City, ST	Phone #	Years Known

Name		Relationship to You
_____ (____) _____		
City, ST	Phone #	Years Known

Name		Relationship to You
_____ (____) _____		
City, ST	Phone #	Years Known

Certifications

I understand and agree that this application does not guarantee employment and is not a contract. I understand that if the school makes an employment offer, acceptance of employment is not a contract of employment for a specified term. This application does not create any expectation of employment or continued employment. I understand that the school employee/employer relationship is an at-will relationship and can be terminated by either party at any time, with or without cause, and with or without notice. I understand that the school's Director will make all formal offers to employee compensation and/or benefits. I understand that any handbooks, manuals, policies and procedures maintained by the school are not contractual in nature, and therefore may be waived, suspended, amended or abolished at the sole discretion of the school at any time. Should I become an employee of the school, I will abide by the terms of the school's policies, which are subject to change or amend and will conduct myself in an ethical and legal manner. I will, in addition, obey all the laws of the United States, the State of Utah and of all localities where the school operates.

I both understand and do authorize the school to perform a Criminal Background Check on me and to make such investigations and inquiries of my references, criminal, personal, social and employment histories, and other related matters as may be necessary in arriving at an employment decision or to qualify for and upon employment. I hereby release the school, former employers and any other persons from any and all liability in regards to discussing and/or releasing information in connections with the school's due diligence efforts regarding my employment application and related paperwork. If I am offered and choose to accept employment with the school, I understand I will be required to demonstrate within three (3) days that I am legally permitted to work in the United States. Failure to provide evidence of Employment Eligibility Verification will result in termination of employment.

I certify that the information furnished herein was completed by me and that all supporting documents and my Resume (if included) are true and complete to the best of my knowledge. I understand that any omission or misrepresentation of material facts on any record or document submitted for employments will constitute grounds for denial of employment or immediate termination of employment regardless of the timing of discovery.

Equal Employment Opportunity (EEO) Policy Statement
It is the policy of the school to promote equal employment opportunities. The school is an equal opportunity employer. The school will not discriminate, nor tolerate discrimination, against any applicant or employee because of race, color, sex, religion, national origin, disability, veteran status, age, marital status, or any other group protected by law.

I have read and understand the Certifications. (check box).

_____	_____
Print Name	Date
_____	_____
Signature	Total number of pages attached:

Employment History (please list most recent position first)	
_____ (____) _____	
(1) Employer Name	Phone
Name & Title of Direct Supervisor May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Address, City, ST, Zip	
Date Employed (MO/YR)	from _____ to _____
Position (Position, grades, subjects taught if education)	

Starting and Ending Salary/Hourly Pay	

Additional Compensation (Incentive Pay, Bonuses, etc.)	

Reason for Leaving (Please be specific)	
_____ (____) _____	
(2) Employer Name	Phone
Name & Title of Direct Supervisor May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Address, City, ST, Zip	
Date Employed (MO/YR)	from _____ to _____
Position (Position, grades, subjects taught if education)	

Starting and Ending Salary/Hourly Pay	

Additional Compensation (Incentive Pay, Bonuses, etc.)	

Reason for Leaving (Please be specific)	
_____ (____) _____	
(3) Employer Name	Phone
Name & Title of Direct Supervisor May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Address, City, ST, Zip	
Date Employed (MO/YR)	from _____ to _____
Position (Position, grades, subjects taught if education)	

Starting and Ending Salary/Hourly Pay	

Additional Compensation (Incentive Pay, Bonuses, etc.)	

Reason for Leaving (Please be specific)	
