BCLUW Community School District
Employment / Job Application

PERSONAL INFORMATION

FULL NAME: _____ **DATE:** _____
First Middle Last

ADDRESS: _____
Street Address Apt/Suite

_____ _____ _____
City State Zip Code

E-MAIL: _____ **PHONE:** _____

POSITION APPLIED FOR: _____ **DATE AVAILABLE** _____

EMPLOYMENT DESIRED: FULL-TIME PART-TIME SEASONAL

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S? YES _____ NO _____

HAVE YOU EVER WORKED FOR THIS EMPLOYER? YES _____ NO _____
*IF YES, WRITE THE START AND END DATES**:** _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR (other than speeding / other minor traffic violation?) YES _____ NO _____
*IF YES, PLEASE EXPLAIN IN AN ATTACHED DOCUMENT

EDUCATION

HIGH SCHOOL: _____ City / State: _____

From: _____ To: _____ Graduate? Yes ___ NO ___

COLLEGE: _____ City / State: _____

From: _____ To: _____ Graduate? Yes __ No __ Degree_____

OTHER: _____ City / State: _____

From: _____ To: _____ Degree / Certification _____

OTHER: _____ City / State: _____

From: _____ To: _____ Degree / Certification _____

PREVIOUS EMPLOYMENT (List current / most recent first)

EMPLOYER 1: _____ _____
Company / Individual Name Street Address

_____ _____ _____ _____
City State Zip Phone

_____ _____
Supervisor Name Supervisor phone

Salary / Pay Rate: $_____ □ HOUR □ SALARY

Job Title: _____ Dates of Employment _____

Primary Responsibilities: _____

_____

Reason for Leaving: _____

EMPLOYER 2: _____ _____
Company / Individual Name Street Address

_____ _____ _____ _____
City State Zip Phone

_____ _____
Supervisor Name Supervisor phone

Salary / Pay Rate: $_____ □ HOUR □ SALARY

Job Title: _____ Dates of Employment _____

Primary Responsibilities: _____

_____

Reason for Leaving: _____

EMPLOYER 3: _____ _____
Company / Individual Name Street Address

_____ _____ _____ _____
City State Zip Phone

_____ _____
Supervisor Name Supervisor phone

Salary / Pay Rate: $_____ □ HOUR □ SALARY

Job Title: _____ Dates of Employment _____

Primary Responsibilities: _____

_____

Reason for Leaving: _____

TRAINING / CERTIFICATIONS

Please list or describe any other training, experience, or certifications that may be specifically applicable to the position you are applying for.

_____

_____

_____

_____

REFERENCES
(PROFESSIONAL ONLY)

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

FULL NAME: _____ RELATIONSHIP: _____
First Last

COMPANY: _____ TITLE: _____

E-MAIL: _____ PHONE: _____

MILITARY SERVICE

ARE YOU A VETERAN? YES _____ NO _____

BRANCH**:** _____ RANK AT DISCHARGE: _____

FROM: _____ TO: _____

TYPE OF DISCHARGE: _____

IF NOT HONORABLE, PLEASE EXPLAIN: _____

BACKGROUND CHECK CONSENT

I UNDERSTAND AND AGREE THAT A CRIMINAL HISTORY BACKGROUND CHECK WILL BE PERFORMED PRIOR TO EMPLOYMENT? *YES* _____ *NO* _____

DISCLAIMER

In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section of this four page application EVEN IF you decide to attach a resume.

Applicant understands that The BCLUW Community School District is an Equal Opportunity Employer. It is the policy of the BCLUW Community School District not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, national origin, disability, or religion in its programs, activities, or employment practices.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ Date _____

PRINT NAME _____

Please Return to:

BCLUW Community Schools District Office
610 East Center Street, PO Box 670
Conrad, Iowa 50621