

EMPLOYMENT RECORD

LIST LAST POSITION FIRST

(Show complete record, including periods between jobs, for at least 10 years. Applications not showing REQUIRED EXPERIENCE may be rejected)

FROM Mo./Yr.	TO Mo./Yr.	Occupation and Description of Duties Performed	Salary	Employer's Full Name and Address	Reason for Leaving (If dismissal, explain below)

USE SPACE BELOW FOR EXPLANATIONS OR ADDITIONAL INFORMATION

Is there any other information which may help us find the job for which you are best qualified?
Have you any special skills, qualifications, training, or experience not shown on this form?

PROFESSIONAL REFERENCES**THREE (3) REFERENCES REQUIRED**

Name and Title	Address	Telephone

ANY PERSONAL DOCUMENTS WHICH YOU ENCLOSE WILL NOT BE RETURNED UNLESS ACCOMPANIED BY A SELF-ADDRESSED ENVELOPE BEARING SUFFICIENT POSTAGE.

I HEREBY CERTIFY that all statements made in this application are true. I authorize the District to investigate my references, work record, education, and other matters related to my suitability for employment. I also authorize the references and my prior employers to disclose to the District any and all letters, reports, and other information related to my professional and personal background, without giving me prior notice of such disclosure.

I agree and understand that any misstatement of material facts herein will cause (a) rejection of my application, and (b) forfeiture on my part to any employment or payment as an employee in the service of this District. I further agree to be fingerprinted, to submit to a complete medical examination, and upon employment, to furnish such proof of age and citizenship as may be directed.

Signature of Applicant

Date