



**EXPERIENCE**

<b>EMPLOYER NAME AND ADDRESS</b>	<b>DATES OF EMPLOYMENT</b>	<b>POSITION HELD</b>	<b>NAME OF SUPERVISOR</b>

MAY WE CONTACT THE ABOVE EMPLOYERS? YES  NO

**REFERENCES**

(PERSONS WHO CAN TESTIFY TO YOUR EXPERIENCE, CHARACTER AND WORKMANSHIP)

<b>NAME</b>	<b>ADDRESS</b>	<b>TELEPHONE</b>	<b>OCCUPATION</b>

**MILITARY SERVICE**

DATE FROM \_\_\_\_\_ TO \_\_\_\_\_ BRANCH \_\_\_\_\_

HIGHEST RANK \_\_\_\_\_ TOTAL MONTHS \_\_\_\_\_ TYPE OF DISCHARGE \_\_\_\_\_

**VOLUNTEER FIREMAN SERVICE**

DATE FROM \_\_\_\_\_ TO \_\_\_\_\_ Name of Firehouse \_\_\_\_\_

**DECLARATION**

My signature below authorizes the Harborfields Central School District to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers, educational institutions, personal references and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the Harborfields Central School District and the reference source from any liability in connection with its release or use.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, falsely answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the Harborfields Central School District.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_