



CLASSIFIED APPLICATION

POSITION(S) YOU ARE APPLYING FOR _____

Name _____

LAST

FIRST

MIDDLE

Street Address or P.O. Box _____

NUMBER

STREET

CITY

STATE

ZIP CODE

Telephone: _____

HOME

CELL

E-Mail

Social Security Number _____

- A. Have you ever been employed by the Rio School District in any capacity? Yes No
If yes, in what capacity? _____
- B. Have you served in the military during time of war? Yes No If yes, were you discharged or released under conditions other than honorable? Yes No
- C. Have you ever been convicted of a felony or misdemeanor other than a traffic violation? Yes No
If yes, please explain on a separate piece of paper and attach to the application.
- D. Have you ever been convicted of a sex offense or narcotics offense? Yes No
If yes, when? _____ Offense? _____ Code and Section Number (if known): _____
- E. Are you at least 18 years of age? Yes No If no, list Work Permit # and expiration date _____
- F. Are you legally eligible for employment in the United States? Yes No
- G. Can you perform the duties and responsibilities of this position with or without a reasonable accommodation? Yes No

EDUCATION AND TRAINING

Circle the highest grade completed 8 9 10 11 12 GED College 1 2 3 4

INSTITUTION	LOCATION	CLASS/PROGRAM	UNITS COMPLETED	DEGREE
High School				
College/University				
College/University				
Business/Trade or other School				

Additional Information: Please list any of the following that apply:

List knowledge of specific machines/equipment _____

Computer or softwareskills _____

Other skills related to this position _____

Licenses and certificates held _____ Typing WPM _____

SKILLS

Please list any foreign languages you can fluently Speak Read Write

Sign Language Yes No

EMPLOYMENT INFORMATION: Begin with your present or most recent job. List any pertinent experience (paid or unpaid) you believe qualifies you for the job. Completion of this section is very important as this may be used as a reference during the examination process. May we contact your present employer? ___Yes ___No

Name of Employer _____

Address _____

Phone # _____ Salary _____

Position _____ Supervisor's Name _____

Date of employment-From _____ To _____

Reason for leaving _____

Name of Employer _____

Address _____

Phone # _____ Salary _____

Position _____ Supervisor's Name _____

Date of employment-From _____ To _____

Reason for leaving _____

REFERENCES-Please list persons not related to you who are familiar with your professional success and/or moral character.

NAME	ADDRESS	PHONE

Please read carefully and sign: I hereby certify that all statements made in this application are true and complete, and any misstatement, omission, or falsification of material facts will be considered cause for rejection of the application or termination of my employment with Rio School District. I authorize the district to make such investigations and inquiries of my personal references, previous employers, and other agencies as may be required. I further agree to be fingerprinted to submit to a complete medical examination by a physician and to furnish such proof of meeting the conditions of employment as may be required, including a negative TB Mantoux Skin Test.

Signature Date

Your completed application will be kept on file for 1 year

Where did you hear about the opening? EDD ___ EdJoin ___ Friend ___ Ventura Star ___ Other _____