

APPLICATION FOR EMPLOYMENT

Date _____

Directions: Type or print in *blue or black ink*. Answer all questions which are applicable. Please do not state "See Resume".

PERSONAL INFORMATION			
Last Name	First Name	Middle	
Address	City	State	Zip
Phone	Day Phone (if Different)	Social Security Number	
Fax Number	E-Mail Address		

EMPLOYMENT INFORMATION	
Position for which you are applying _____	
Are you employed at the present time? _____ If yes, please complete the information below	
Employer's Name:	_____
Employer's Address:	_____ _____
1. How long have you been with this employer? _____	Present Salary: _____
2. If offered a position, when can you report for work? _____	
3. If hired can you show proof of your legal right to work in the U.S.?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Have you ever been dismissed, or asked to resign from any position?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Have you ever been convicted of a felony, or a misdemeanor which resulted in imprisonment? A yes answer to the above question does not necessarily disqualify an applicant from employment.	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes to number 4 or 5, please explain: _____ _____	

EDUCATION	
Please list on the following lines all schools attended and any other pertinent information about your education.	
School(s)	Subjects Studied (if applicable)
High School	_____
College (Including dates attended)	_____

EMPLOYMENT EXPERIENCE (List most recent experience first)

Name & Address	Position(s) Held	Dates (Start - End)

REFERENCES

Name & Address (Include City, State, Zip)	Phone	Relationship

The following section is to be completed by applicant for an OFFICE POSITION:

Can you type? _____ How many words per minute? _____

Computer Skills Macintosh _____ PC _____

Please provide computer and software knowledge below:

I certify that all statements made herein and on the enclosed resume are true and correct to the best of my knowledge. I authorize investigation of all statements herein recorded. I release from liability all persons and organizations reporting information required by this application.

Signature

Date



REEDSPORT SCHOOL DISTRICT 105

100 Ranch Road, Reedsport OR 97467
541-271-3656

Criminal History Verification of Applicants/Volunteers

Please type or print clearly as appears on Legal Identification

Legal Name: _____
(Last Name) (First Name) (Middle Name)

List Other Names Previously Used: _____
(Include Maiden Name)

Social Security No: _____ Date of Birth: _____ Gender: Male ___ Female ___
MM/DD/YY

Driver License/Identification Card No.: _____ Issue State: _____

Providing your social security number on this form is voluntary. If you choose not to disclose the social security number, this will not be a basis for denial of employment or any rights, services or benefits to which you are otherwise entitled. If you do provide the number the District will use it as an additional identifier to search for any criminal record you may have. Your social security number will be used as stated above. State and federal laws protect the privacy of your records.

Address: _____
Street Apt # City State Zip

A. Have you **EVER** been convicted of a sex-related crime? Yes No

1. If yes, was the conviction in Oregon or another state? Please specify state: _____

2. If yes, did the crime involve force or minors? Yes No

B. Have you **EVER** been convicted of a crime involving violence or threat of violence? Yes No

1. If yes, was the conviction in Oregon or another state? Please specify state: _____

C. Have you **EVER** been convicted of a crime involving criminal activity in drugs or alcoholic beverages? Yes No

1. If yes, was the conviction in Oregon or another state? Please specify state: _____

D. Have you **EVER** been convicted of any other crime except a minor traffic violation? (Includes Traffic Crimes) Yes No

E. Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal? Yes No

Advisory: A check of the applicant's criminal history will be made by Reedsport School District to verify the responses to the preceding questions.

I hereby grant Reedsport School District permission to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, Reedsport School District will conduct a criminal offender record check of applicants for all prospective school employees and volunteers working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone 503-731-4075.

I acknowledge reading and the receipt of this notice.

Applicant's Signature: _____ Date: _____

Phone Number: _____ (For Office Use Only: ___HES___RCCS) 9/4/14