

WALDRON SCHOOL DISTRICT

(An Equal Opportunity Employer)

1560 West 6th Street

Waldron, AR 72958

CLASSIFIED

APPLICATION FOR EMPLOYMENT

Position applying for _____

NAME _____

Social Security Number _____

MAILING ADDRESS _____
Street or P. O. Box City State Zip

Phone Number _____ How long at this address? _____

Previous address _____

Date of Birth _____

If applicable, please check: Veteran _____ Disabled Veteran _____ Spouse of a Deceased Veteran _____

Name and address of present employer _____

Duties _____ Dates of employment _____

Previous work experience: _____ Dates _____

Dates _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please explain _____

Education: Highest grade completed _____ Names and address of school(s) _____

Special training and/or skills _____

References: Include at least one business person and one professional (no relatives).

1 _____

2 _____

3 _____

4 _____

ADDITIONAL COMENTS:

To the best of my knowledge, the above statements are true and correct. I authorize investigation of all statements contained in this application. I understand misrepresentation or omission of facts called for is cause for dismissal without notice at any time during my employment.

Date _____

Signature of applicant _____

NOTICE: ALL NEW EMPLOYEES ARE REQUIRED TO BE FINGERPRINTED FOR STATE AND FBI BACKGROUND CHECKS AT THEIR OWN EXPENSE.

