

WHEATON AREA SCHOOLS Application for Employment



It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions <u>must</u> be answered.

PERSONAL DATA	PERSONAL DATA								
Name (last, first, middle)									
Street Address and/or Mailing Address				City				State	Zip
Home Telephone Number		Business Telephon	ie Numbe	er Cellular Telephone Number					
Date you can start work	Salary Desired					Do you have a High School Diploma or GED?			
POSITION INFORMATIO	OSITION INFORMATION								
Position applying for:				Check all that you are willing to work: Full Time Days Weekends					
Are you authorized to work in the U.S? Yes No									
Have you ever been convicted of a felony? Yes No If yes, explain:									
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.									
	School Name		Degi	Degree		Address/City/State			
High School									
College									
Other									
VETERAN STATUS									
Are you a U.S. Military Veteran?	Yes 🗌 No	Entry Date (mo/	day/yr)	yr) Disch			Discharge Date (mo/day/yr)		
Branch				Rank	k at Discharge				
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.									
REFERENCES Please list three professional references not related to you , with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.									
Name	Name Address/City/State						Phone		Relationship
			-			-			

WORK HISTORY Start with your present or most recent employment and work back. Use separate sheet if necessary.									
Job Title #1	Start Date (mo/	/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's N	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Salary	Ending Salary						
May we contact your present employer?									
Job Title #2	Start Date (mo/	/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's N	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Salary	Ending Salary						
Job Title #3	Start Date (mo/	day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's N	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving	Starting Salary		Ending Salary						
	1								
Job Title #4	Start Date (mo/	/day/yr)	End Date (mo/day/yr)						
Company Name	Supervisor's N	ame	Phone Number						
City	State		Zip						
Duties:									
Reason for Leaving		Starting Salary	Ending Salary						

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.