

OAK GROVE APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

Date: _____

Name: _____ Social Security Number: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Phone No.: _____ Are you 18 years or older? Yes No

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? Yes No

SPECIAL QUESTIONS - DO NOT ANSWER ANY OF THESE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED A BOX PRECEDING A QUESTION. THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

What Foreign Languages do you speak fluently? _____ Read _____ Write _____

Have you ever been convicted or received court supervision for the commission of a felony or misdemeanor or been subject to deferred prosecution of any criminal offense?*** Yes _____ No _____

If yes, describe _____

*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

***You will not be denied employment solely because of a criminal offense, unless required by statute or the offense is related to the job for which you have applied.

EMPLOYMENT DESIRED

Position: _____ Date you can start? _____ Salary desired? _____

Are you employed now? _____ Where? _____ When? _____

Ever applied to this company before? _____ Where? _____ When? _____

EDUCATION	Name and location of school	*No. of Years attended?	Did you graduate?	Subjects Studied
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

*The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

GENERAL

Subjects of Special Study or Research Work: _____

U.S. Military or Naval Service _____ Rank _____ Present Membership in National Guard or Reserves _____

Former Employers: (List below your last three employers, starting with the most recent employer first).

Date / Month / Year	Name and Address of Employer		Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				

References: Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

Physical Record:

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes No

If yes, what can be done to accommodate your limitation? _____.

Please Describe: _____

In Case of

Emergency Notify _____
Name
Address
Phone No.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYED IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE.

Date: _____ Signature: _____.

DO NOT WRITE BELOW THIS LINE (District Use Only)

Interviewed By: _____ Date: _____.

Hired: Yes No Position _____ Dept. _____.

Salary/Wage _____ Date Reporting to Work _____.

Approved: 1. _____ 2. _____ 3. _____
Direct Manager
Superintendent
Board of Education