



SHEPHERD PUBLIC SCHOOLS
Employment Application



***PLEASE FILL OUT THE APPLICATION COMPLETELY AND NEATLY.
*SIGN AND DATE.**

***Incomplete or non-readable applications will not be accepted.**

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position(s) Applied for: _____

Are you a citizen of the United States? YES NO
 If no, are you authorized to work in the U.S.? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education/Skills

High School: _____
From: _____ To: _____ Did you graduate? YES NO

College: _____
From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other training or skills: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
From: _____ To: _____ Salary: _____
Position: _____ Responsibilities: _____
Reason for leaving: _____ May we contact employer: _____

Company: _____ Phone: _____
Address: _____ Supervisor: _____
From: _____ To: _____ Salary: _____
Position: _____ Responsibilities: _____
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Company: _____ Phone: _____
Address: _____ Supervisor: _____
From: _____ To: _____ Salary: _____
Position: _____ Responsibilities: _____
Reason for leaving: _____ May we contact employer: _____

References

Please list three references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

A criminal history check conducted by the Michigan State Police (MSP) and the Federal Bureau of Investigation (FBI) must be completed prior to beginning work with the district. The cost for fingerprinting and processing is the responsibility of the employee.