



SALEM COMMUNITY SCHOOLS

Leading Students to Success!

Superintendent: Jill Mires

School Board: Rodney Brough, Mark Day, Allison Ezzell, Becky Humphrey, Steve Motsinger, Ray Oppel, Rebecca White

Support Staff Application

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or disability.

An Equal Opportunity Employer
(Please Print or Type)

Date _____

Name _____
Last First Middle

Address _____
Number and Street City State Zip

Home Telephone _____ Email Address _____

Social Security Number _____

Are you over the age of 18? _____ Yes _____ No

SPECIFIC POSITION(S) APPLIED FOR:

Secretarial/Clerical

Educational Classroom Asst.

Service Position

____ Custodian ____ Bus Driver

____ Maintenance ____ Cafeteria

____ Other

Have you filed an application with our Schools before? _____

If yes, give date _____ and position applied for _____

EDUCATION

School Name	City & State	Dates Attended	Diploma or Degree
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Last High School Attended:

College or Universities:

Business or Trade:

Other:

*If you did not receive a degree, indicate the number of college hours attained: _____

Please attach your college transcript with this application.

EXPERIENCE

List all Experience – Use Separate Sheet if Necessary

From	To	No. of Years	Name & Address of Employment	Immediate Supervisor	Type of Job
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REFERENCES

Full Name of Reference	Phone	Number & Street	City & State	Zip
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FOR EDUCATIONAL CLASSROOM ASSISTANT APPLICATIONS

Have you passed the Para-Pro Test? _____
(yes or no)

Date of Expiration _____

FOR SECRETARIAL/CLERICAL APPLICANTS

Do you type? _____ No. of years Experience _____
(yes or no)

Do you operate a computer? _____ No. of years Experience _____
(yes or no)

Computer Programs Used:

Please list below any additional office machines with which you have had previous experience:

Type of Machine

Number of Years Experience

Describe any additional office experience/skills and number of years experience:

BUS DRIVERS

Do you possess a CDL License? _____
(yes or no)

Number of years of Commercial Driving Experience _____

Have you ever received any traffic violations or citations? _____

If yes, please explain: _____

MAINTENANCE

What specific skills do you possess?

_____ Boilers	_____ Welder	_____ Masonry
_____ A/C	_____ Carpentry	_____ Other
_____ Plumbing	_____ Electrical	(Please specify)

FOR ALL APPLICANTS

List any additional information you think would be helpful concerning your knowledge, skills and experience related to the job for which you are applying.

Briefly state what you feel you can contribute as an employee for **SALEM COMMUNITY SCHOOLS** in the position for which you are applying.

If you have a relative who works for this school corporation or who serves as a member of the Board of Trustees, please give the name and address and describe your relationship:

Have you ever been arrested for or convicted of a crime that has not been expunged by a court?

_____ Yes _____ No

If yes, please explain: _____

Conviction of a crime is not an automatic bar to employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

Why do you desire to leave your present position, or why did you leave your last position?
(Questions do not apply to those graduating this year.)

Have you ever been involuntarily terminated or asked to resign from the employment of another school district? _____ Yes _____ No

If yes, please give the name of the district, the date and the reasons for the termination or request for resignation. _____

Are you aware of any reason you would not be able to perform the duties required of the position for which you are making an application? _____ Yes _____ No

If yes, please explain: _____

AGREEMENT

I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentation or willful omissions of fact shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the **SALEM COMMUNITY SCHOOLS** which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the **SALEM COMMUNITY SCHOOLS** now in force and effect or as they may change during my employment, if I am employed by the **SALEM COMMUNITY SCHOOLS**.

Signature of Applicant

I hereby authorize the **SALEM COMMUNITY SCHOOLS** to conduct work history, credit history, personal reference or police record inquiries to determine my acceptability for employment.

Signature of Applicant