

WORK/VOLUNTEER EXPERIENCE:

List all work and volunteer experience, most recent to be listed first.

Employer Name _____
Employer Address _____
Job Title _____
Job Duties _____
Dates of Employment (mm/dd/yyyy) _____
Reason for Leaving _____

Employer Name _____
Employer Address _____
Job Title _____
Job Duties _____
Dates of Employment (mm/dd/yyyy) _____
Reason for Leaving _____

Employer Name _____
Employer Address _____
Job Title _____
Job Duties _____
Dates of Employment (mm/dd/yyyy) _____
Reason for Leaving _____

Employer Name _____
Employer Address _____
Job Title _____
Job Duties _____
Dates of Employment (mm/dd/yyyy) _____
Reason for Leaving _____

Employer Name _____
Employer Address _____
Job Title _____
Job Duties _____
Dates of Employment (mm/dd/yyyy) _____
Reason for Leaving _____

REFERENCES:

Please give the names of three persons not related to you, whom you have know at least one year.

Name _____ Position _____
Address _____
Company/School _____ Phone Number _____
Relationship to Applicant _____

Name _____ Position _____
Address _____
Company/School _____ Phone Number _____
Relationship to Applicant _____

Name _____ Position _____
Address _____
Company/School _____ Phone Number _____
Relationship to Applicant _____

BACKGROUND INFORMATION:

HAVE YOU EVER BEEN FOUND GUILTY OR DO YOU PRESENTLY HAVE ANY VIOLATIONS OF LAW INCLUDING ORDINANCE VIOLATIONS OTHER THAN MINOR TRAFFIC VIOLATIONS? (IN ACCORDANCE WITH STATE LAW, PENDING CHARGES OR CONVICTIONS WILL NOT BE USED OR CONSIDERED UNLESS THEY ARE SUBSTANTIALLY RELATED OT CIRCUMSTANCES OF THE PARTICULAR JOB.)

() YES () NO

IF YES, EXPLAIN _____

AUTHORIZATION:

I authorize investigation of all statements contained in this application or made by me during the hiring process. I understand that misrepresentation or omission of facts called for is cause for dismissal. The School District of Auburndale and its employees shall not be held liable if I am denied employment, if it is verified that I provided false statements and/or omitted substantive information.

I voluntarily grant the School District of Auburndale the right to investigate statements I have made in this application, as well as other job-related information, activities and references. I also authorize any current or former employer, person, firm, corporation, school or government agency to disclose to the School District of Auburndale any information that they may have regarding me. I release the School District of Auburndale, and providers of information, from liability and for any damages which may result from the furnishing of this information.

Legal Name _____

Date of Birth (Required) _____ Telephone Number () _____

Signature _____ Date Signed _____