

Sandwich C.U.S.D. #430

720 S. Wells

Sandwich, Illinois 60548

Phone 815-786-2187 Fax 815-786-6229 www.sandwich430.org

APPLICATION FOR EMPLOYMENT

(Please type or print)

AN EQUAL OPPORTUNITY EMPLOYER



Position Applied for _____ Date _____

Sandwich Community Unit School District #430 (the "District") considers all applicants for employment without regard to race color, religion, sex, national origin, age, disability, or status as a Vietnam-era or special disabled veteran in accordance with federal law. In addition, the District complies with applicable state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. The District also provides reasonable accommodation to individuals with a disability in accordance with applicable laws. Any applicant who may require assistance and/or accommodation in completing this application should contact Central Office at 815-786-2187

Name

Current Address Street City State ZIP Code

Telephone Number (_____) _____

Please indicate how you learned of this opening: _____

Do you want to work _____ part-time _____ 10 months _____ 12 months

Have you worked for us before? _____ If yes, when? _____

If hired, on what date will you be available to work? _____

What experience, skills, technology or other qualifications do you feel would especially qualify you for work with this school district? (PLEASE SPECIFY) _____

Have you ever been convicted of a crime? (Please exclude minor traffic offenses and any conviction entered while you were a juvenile).

Yes _____ No _____ If yes, state the date of conviction, the court where conviction occurred and describe the sentence.

PRIOR WORK HISTORY (List in order, last or present employer first)

<u>DATES</u>	<u>NAME AND ADDRESS OF EMPLOYER</u>	<u>SUPERVISOR'S NAME/TITLE</u>	<u>REASON F0R LEAVING</u>
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
Describe in detail the work you did:			

PRIOR WORK HISTORY (List in order, last or present employer first)

<u>DATES</u>	<u>NAME AND ADDRESS OF EMPLOYER</u>	<u>SUPERVISOR'S NAME/TITLE</u>	<u>REASON F0R LEAVING</u>
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
Describe in detail the work you did:			

PRIOR WORK HISTORY (List in order, last or present employer first)

<u>DATES</u>	<u>NAME AND ADDRESS OF EMPLOYER</u>	<u>SUPERVISOR'S NAME/TITLE</u>	<u>REASON F0R LEAVING</u>
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
Describe in detail the work you did:			

PRIOR WORK HISTORY (List in order, last or present employer first)

<u>DATES</u>	<u>NAME AND ADDRESS OF EMPLOYER</u>	<u>SUPERVISOR'S NAME/TITLE</u>	<u>REASON F0R LEAVING</u>
FROM: _____	_____	_____	_____
TO: _____	_____	_____	_____
Describe in detail the work you did:			

May we contact the employer listed above? _____
If not, indicate below which one(s) you do not wish us to contact.

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME AND ADDRESS	HOW MANY YEARS ATTENDED	GRADUATED	YEAR OF GRADUATION	COURSE OR MAJOR
ELEMENTARY SCHOOL			<input type="checkbox"/> Yes <input type="checkbox"/> No		
HIGH SCHOOL			<input type="checkbox"/> Yes <input type="checkbox"/> No		
COLLEGE			<input type="checkbox"/> Yes <input type="checkbox"/> No		
GRADUATE SCHOOL			<input type="checkbox"/> Yes <input type="checkbox"/> No		

MILITARY SERVICE RECORD

Have you ever served in the Armed Forces? ☐ Yes ☐ No

Dates of duty: From: _____ to: _____
Month Day Year Month Day Year

What were your duties in the Service (including special training and duty station? _____

Are you a United States Citizen? ☐ Yes ☐ No

Have you registered for the Draft? ☐ Yes ☐ No

Have you ever been bonded? ☐ Yes ☐ No

If yes, for what job(s)? _____

PERSONAL REFERENCES - (Excluding Former Employers or Relatives - list four)

NAME	ADDRESS	PHONE NO.

PRE-EMPLOYMENT STATEMENT

(PLEASE READ VERY CAREFULLY BEFORE SIGNING BELOW)

I understand and voluntarily agree that:

1. The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from employment with the Sandwich Community Unit School District #430.
2. Any offer of employment I may receive from the Sandwich Community Unit School District #430 is contingent upon my successful completion of the District's total pre-employment screening process, including the District's receiving references that it considers satisfactory, and my satisfactory completion of any post-job offer, and pre-employment physical examination that the District may require.
3. As a condition of employment, I may be required to undergo and successfully pass a screening for alcohol and/or drugs. I also understand and agree that, if employed, I may be required to submit to an alcohol or drug screening consistent with the applicable policies of the Board of Education and laws of the State of Illinois.
4. In processing my application for employment, the District may verify all of the information provided by me. I further understand that I am subject to a criminal background investigation pursuant to applicable law of the State of Illinois, and that I may be subject to immediate dismissal if the investigation discloses conviction of certain specified criminal drug offenses under §10-21, *et seq.* of the Illinois School Code. I hereby authorize the District to initiate a criminal background investigation by the Illinois State Police.
5. I authorize and request that all of my present and former employers, and those individuals I have listed as personal references, furnish information about my employment record, including a statement for the reason for the termination or separation of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.

Date

Applicant Signature