



SPARTA AREA SCHOOLS

An equal opportunity employer
 465 S. Union St., Sparta, Michigan 49345
 Mr. Kent Swinson, Superintendent

APPLICATION FOR EMPLOYMENT: SUPPORT STAFF

This form must be filled out completely. All information will be treated in a confidential manner.

PERSONAL INFORMATION:	<i>DATE:</i> _____
Name _____	
Last	First
Middle _____	
Address _____	
Street	City
State	Zip
Home Telephone _____	Business Telephone _____
Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	

POSITION DESIRED:	
_____ Teacher Assistant	
Level Preferred: _____ Elementary _____ Middle School _____ High School _____ Special Ed	
_____ Coaching	_____ Maintenance
_____ Food Service	_____ Custodial
_____ Secretarial	_____ Bus Driver
_____ Grounds	_____ Security Guard
Do you prefer full-time, part-time, or substitute employment? _____	
Have you ever been previously employed with us? Yes _____ No _____ When? _____	

EDUCATION:				
	Name and Location	Years Completed	Diploma/Degree	Course of Study
High School				
College				

List any skills/experiences you feel would qualify you for a position with us: _____

EMPLOYMENT INFORMATION: Please give accurate, complete information. List most recent employment first.	
1. Company Name:	Telephone:
Address:	Employed From: To:
Name of Supervisor:	State Job Title:
Describe your work:	Reason for Leaving:
2. Company Name:	Telephone:
Address:	Employed From: To:
Name of Supervisor:	State Job Title:
Describe your work:	Reason for Leaving:
3. Company Name:	Telephone:
Address:	Employed From: To:
Name of Supervisor:	State Job Title:
Describe your work:	Reason for Leaving:

REFERENCES: (Not former employers or relatives)		
Name and Title	Complete Mailing Address	Telephone Number

I hereby give permission to contact the employers and/or references listed above concerning my prior work experience.

Signed

Is there any reason you may be unable to perform the job-related functions of the position for which you have applied? _____ If yes, please identify the particular job-related functions that you may be unable to perform:

Have you ever been dismissed or asked to resign from employment or refused re-employment? _____ If yes, please explain: _____

Have you been convicted of a crime? _____ If yes, please state the offense, the date of conviction, and the state and court of conviction: _____

Do you have any felony charges pending? _____ If yes, please explain the nature of any pending felony charges and identify the state and court where the charges are pending: _____

TEACHER ASSISTANT APPLICANTS COMPLETE THIS SECTION:

What experience have you had working with children, ages 4-12? _____

What experience have you had working with children, ages 13-18? _____

What experience have you had working with young people who have special needs? _____

SECRETARIAL APPLICANTS COMPLETE THIS SECTION:

Indicate office skills and experience:

____ Microsoft Word ____ Excel ____ WordPerfect ____ PowerPoint ____ WPM

Special Training or Skills: (Licenses, certificates, word processing, typing, shorthand, etc.) _____

MAINTENANCE/GROUNDS APPLICANTS COMPLETE THIS SECTION:

What is your area of skill?

____ Plumbing ____ Carpentry ____ Masonry ____ Electrical

____ Auto Mechanics ____ Maintenance ____ Custodial ____ Heating/Cooling

What machinery or equipment can you operate? _____

Have you worked at a trade? _____ What trade? _____

What other qualifications do you possess? _____

BUS DRIVER APPLICANTS COMPLETE THIS SECTION:

Do you have a valid driver's licence? _____ Class and licence number _____

Do you presently have violation points? _____ If yes, how many? _____

FOOD SERVICE APPLICANTS COMPLETE THIS SECTION:

Please list the formal and informal experience and/or training you have had in commercial or institutional food service: _____

NOTICE TO ALL APPLICANTS

Before any applicant may begin work, the person must be able to verify, under Federal law (Immigration Reform and Control Act of 1986), that he or she is authorized to work in the United States. All applicants offered a position with Sparta Area Schools will have to document their authorization to work before the hiring process will be complete.

All applicants are being notified at this time that, if selected for hire, it will be their responsibility to provide Sparta Area Schools with documentation showing their right to work. Sparta Area Schools is giving you this notice so you may have those documents ready if you should be offered a position. The documents will be reviewed by the personnel department at the time a conditional offer of employment is made.

NOTICE OF HANDICAPPER RIGHTS

Michigan law requires that you notify Sparta Area Schools in writing within 182 days after you know or should have known that an accommodation for a disability will be necessary to perform the duties of the position for which you are applying.

NOTICE OF MEDICAL EXAMINATION

Any job you are offered by Sparta Area Schools will be conditional on the results of a medical examination if one is requested by Sparta Area Schools. The medical exam will be completed before you begin work on your job.

APPLICANT'S CERTIFICATION AND AGREEMENT

READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION FOR EMPLOYMENT

1. **Certification of Truthfulness:** I certify that all statements on this Application for Employment are made truthfully and without evasion, and further understand and agree that such statements may be investigated and, if found to be false, will be sufficient reason for not being employed, or if employed, may result in dismissal.
2. **Authorization for Employment Information:** I hereby authorize Sparta Area Schools to make inquiry to my current or former employer or employers regarding unprofessional conduct and request any associated documents. I further realize that my failure to sign the attached release form or to provide accurate information regarding my current and past employer(s) will result in non-consideration of my application for employment.
3. **Physical Examination and Testing:** If a position is offered, I agree to submit myself, upon request, for physical examination by a physician appointed by the District and to execute appropriate releases for that purpose. I also agree to participate in any aptitude or other testing the District believes will assist in hiring or placement decisions.
4. **Criminal Records Check:** I agree to execute an authorization for this employer to secure criminal conviction history and any record of referrals to first offender programs from the appropriate law enforcement agency, should the District determine it is necessary to do so.
5. **Unemployment Benefits:** I agree that I am ineligible for unemployment benefits if I am hired as a substitute or temporary employee.

Signature of Applicant

Date

The Sparta Area School District does not discriminate on the basis of race, color, religion, national origin, age, gender, or physical/mental disability in its educational programming, enrollment, or employment.