

Employment Application



Four Rivers Community School, Inc.
 2449 SW 4th Ave.
 Ontario, OR 97914
 Phone: 541-889-3715
 Fax: 541-889-3718
 www.4riverscs.org

Date:

Name:

Address:

State/Province:

Zip/Postal Code:

SSNumber:

Home Phone:

Cell

Phone:55

Position Applied for:

Salary Desired:

Hours Available to Work:

Mon	<input type="text"/>
Tues	<input type="text"/>
Wed	<input type="text"/>
Thurs	<input type="text"/>
Fri	<input type="text"/>
Sat	<input type="text"/>
Sun	<input type="text"/>

Full-Time Part-time Full or part-time

When available to begin work?

Education

Type of School	Name of School and Complete Mailing Address	No. Years Completed	Major or Degree
High School	<input type="text"/>	<input type="text"/>	<input type="text"/>
College Bus. or Trade School	<input type="text"/>	<input type="text"/>	<input type="text"/>
Professional School	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

Have you ever been convicted of a crime: yes no

If yes, please explain

Previous Employment (list up to 3)

1.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for leaving (be specific):

List the jobs you've held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

2.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

Continue on the next page

3.

Name of Employer:

Name of last supervisor:

Dates of employment:

From:

To:

Salary:

From:

To:

Complete Address:

Phone #:

Last job title:

Reason for leaving (be specific):

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

May we contact your employer: yes no

Skills:

Typing:

Computer:

PC

Mac

Both

Applications (list all that apply):

Other Skills:

Please list 2 references other than relatives and previous employers

Name		
Position		
Company		
Telephone		

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying:

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

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: _____

Nondiscrimination Policy

It is a policy of the State Board of Education and a priority of the Four Rivers Community School that there will be no discrimination or harassment on the grounds of race, color, sex, marital status, religion, national origin, age, sexual orientation, or disability in any educational programs, activities or employment.

Persons having questions about equal opportunity and nondiscrimination should contact Chelle Robins, Superintendent, 2449 SW 4th Ave., Ontario, OR 97914; phone 1-541-889-3715; or fax 1-541-889-3718.