4
FOR OFFICE USE ONLY
Act 34.
Act 157
Physical
Tine Test
1.9
17/1 4
Wash.

CHARTIERS-HOUSTON SCHOOL DISTRICT 2020 WEST PIKE STREET, HOUSTON, PA 15342

APPLICATION FOR EMPLOYMENT

For Non-Professional Positions

Please circle the position(s) for which you are applying: Maintenance - Custodian - Secretary – Clerical Aide – Instructional Aide – Cafeteria Athletic Coach (specify sport)								
We consider applicants for all positions without regard to presence of a non-job-related medical co	race, color, religion, sex, national or	rigin, ag	je, mari	tal or vetera	n status,	the		
PLEASE PRINT LEGIBLY Position(s) Applied for:		I Data of	Applicat	ioni				
Position(s) Applied tot.		Date of	Аррисас	ion:				
		<u> </u>			·			
Last Name First	Name		(vi	liddle Name				
Address: Number Street	City	State	Z	ip Code				
Telephone Number(s)		Social S	ecurity N -	lumber -				
Area Code () -								
If you are under 18 years of age, can you provide				(T) 11				
required proof of your eligibility to work?		Ц	Yes	□ No				
Have you ever filed an application with us before?			Yes	□ No				
If yes, give date		-	163	□ (10				
Have you ever been employed with us before?			Yes	□ No				
If yes, give date								
A				[mm]				
Are you currently employed?		Ш	Yes	□ No				
May we contact your present employer?			Yes	□ No				
may me commer your present employer.				_ 140				
On what date would you be available for work?								
Are you available to work: Full-Time Part Time	Shift Work Temporary	Cir	cle ap	propriate a	inswer			
Are you interested in being placed on our Substitute Lis	t if full time work is not availab	le? 🗀	Yes	□ No				
A manufacture and the same "lane a CO" additional and a coldinate to								
Are you currently on "lay-off" status and subject to	recall?	Ш	Yes	□ No				
Can you travel if a job requires it?			Yes	□ No				
- an you traver it a job requires it.		-	100	_ ,,,				
Have you been convicted of a crime within the last			Yes	□ No				
Conviction will not necessarily disqualify an applicant from em	oloyment							
fives places explain								
f yes, please explain								

EDUCATION:

	Elei	men	tary	Sch	iool		Hig	h Se	choo		Colle		radı Univ					iate sior	
School Name and Location																			
Years Completed	4	5	6	7	8	9	Ţ	0	11	12	1	2	3		4	1	2	3	4
Diploma/Degree Describe Course of Study													A	···			 		
Describe any specialized training, apprenticeship skills and extra-curricular activities												•							
Describe any honors you have received								•											
State any additional information you feel may be helpful to us in considering your application																			

Additional Space:

REFERENCES:

REFERENCES.		
Give the name, address and telephone	number of three references who are not related to you and	are not previous employers
Name	Address	Phone #
1.		()
2.		()
3.		()
Have you ever had any job-related	training in the United States military?	□ Yes □ No
If yes, please describe		
Are you aware of the essential fun	ctions of the position for which you are applying?	□ Yes □ No
If yes, are you able to perform the	essential function of the position for which you ar	e applying? — Yes — No
f accommodations are necessary,	please identify the requested accommodations.	
Do you know any member of the Cadministration?	hartiers-Houston Board of Education or member o	f the school district's Yes No
f yes, who and what is the relation		
Person(s)	Relationship	

EMPLOYMENT EXPERIENCE:

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

				<u> </u>				
Employer	Dates Er	nployed						
		From	To					
Address								
Telephone Number(s)		Hourly Ra	te/Salary					
		Starting	Final					
Job Title	Supervisor							
Reason for Leaving								
Employer	40	Dates Em	ployed	Work Performed				
		From	То					
Address	8							
Telephone Number(s)		Hourly Rat	e/Salary					
		Starting	Final					
Job Title	Supervisor							
Reason for Leaving								
Employer =	Dates Em	pioyed	Work Performed					
		From	То					
Address								
Telephone Number(s)		Hourly Rate						
		Starting	Final					
Job Title	Supervisor							
Reason for Leaving								
Employer	Dates Emp	loyed	Work Performed					
		From	То					
ddress		22		(40)				
elephone Number(s)	Hourly Rate	Salary						
		Starting	Final					
ob Title	Supervisor							
eason for Leaving								
		1	1	1				

If you need additional space, please continue on the reverse side of this sheet