



North Lake School District No. 14

57566 Fort Rock Road, Silver Lake * OR 97638 * 541-576-2121 * FAX 541-576-2705

EMPLOYMENT APPLICATION

Position Applying For: _____

Date of Application: _____

PERSONAL INFORMATION

Name _____
Last (FULL LEGAL NAME) First Middle

Address _____
City Zip

Telephone _____ Work/Mess. Phone _____

Social Security Number: _____ - _____ - _____ Are you legally able to work in the United States? _____
Successful applicants will be required to complete the eligibility for employment form I-9, and supply the required I.D.

Are you able to lift up to 50 pounds, bend, climb and reach? _____

Do you smoke? _____ North Lake School is a smoke free campus. Condition of Health? _____

Have you ever been fired or asked to resign by an employer? No Yes
(if YES, attach explanation).

Have you ever been convicted for any offense other than a minor traffic violation? No Yes
(If YES, attach explanation).

Reason for desiring position: _____

EDUCATIONAL BACKGROUND

	Name and Location of School or College	Circle Highest Grade/Year	Did you Graduate	If you graduated, what was your degree and major?
High School Diploma and/or G.E.D.		9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree _____ Major _____ Number of Credits Earned _____
Trade, Business, Correspondence or Graduate School		How long?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Degree _____ Major _____ Number of Credits Earned _____

REFERENCES

Name, Address, Phone & Job Position

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NOTE: A drug-screening test is required for employment. An Employment Physical Examination may be required for certain positions.

An Equal Opportunity and Affirmative Action Employer



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EMPLOYMENT HISTORY

Record your present or last position first and list in chronological order. Complete all questions for each job

EMPLOYER NAME	DATES EMPLOYED (MO/YR)	WHAT WAS YOUR JOB TITLE ?
ADDRESS (MUST INCLUDE CITY AND STATE)	FROM: TO:	FT__ PT__ Temp__
SUPERVISOR'S NAME, TITLE AND PHONE NUMBER	MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
POSITION(S) HELD—BRIEFLY EXPLAIN YOUR DUTIES, RESPONSIBILITIES, AND ANY SUPERVISORY ROLE:		
REASON FOR LEAVING		
EMPLOYER NAME	DATES EMPLOYED (MO/YR)	WHAT WAS YOUR JOB TITLE ?
ADDRESS (MUST INCLUDE CITY AND STATE)	FROM: TO:	FT__ PT__ Temp__
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REASON FOR LEAVING		

APPLICANT'S STATEMENT

I authorize North Lake School District No. 14 and its representatives to inquire of all former employers or others who know me or know of me. North Lake School and its agents may conduct background evaluations and obtain information including, civil and criminal history checks from Oregon Department of Education, Federal, State or local authorities, Department of Transportation (DOT) mandated Pre-employment, refusals to test, alcohol tests of >.04, other violations of the DOT alcohol and drug rules, and return to duty and follow-up testing compliance, as applicable, and I hereby expressly authorize such inquiries and release all employers and persons named herein from all liability for any damages on account of their furnishing such information. I acknowledge that any offer of employment is conditioned upon my taking a drug screen and North Lake School's receipt of satisfactory results, and a physical examination if necessary to determine ability to perform essential duties of the position offered.

I certify that I have read, understand, and agree to the entire application.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I understand that any false information that I give may result in termination of my candidacy or any subsequent employment.

Applicant's Signature _____ Date _____

North Lake School District No. 14
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Silver Lake, OR 97638

Dear Applicant:

If you answered “YES” to any questions on the Criminal History Verification of Applicants form [reverse side], please attach a written explanation.