

SHARON ACADEMY

Where learning is FUNdamental

Application for Employment

In order for you to be considered for employment, you must fully complete and sign this application. The application will remain active for 90 days. Applications are only accepted for currently vacant positions and will only be considered for the specific position listed below.

Sharon Academy is an equal opportunity employer. We consider applicants for all positions without regard to race, color, age, religion, sex, medical condition or handicap, or any other legally protected status.

Date of Application _____

Position Applying For _____

PLEASE PRINT

Name (First, Middle, Last) _____

Current Address _____

City, State, Zip _____

Email
Address _____

Telephone Number ____ - ____ - ____ Social Security Number ____ / ____ / ____

Emergency Contact _____

Emergency Contact Number ____ - ____ - ____

Are you either a U.S. citizen or legally eligible for employment in the United States?

Yes _____ No _____

What types of employment will you consider? Full-time _____ Part-time _____

Are there any reasons why you would not be able to report to work on time and on a consistent basis? Yes_____ No_____

If you answered yes, please explain:_____

Are you able to perform the essential functions of the job with or without accommodations?

Yes_____ No_____

If accommodations are being requested, please specify:_____

Salary or Hourly Rate Requesting_____

Date Available for Employment_____

Are you at least 18 years of age? Yes_____ No_____

Hours and days available:

Monday Tuesday Wednesday Thursday Friday

Have you ever been convicted of a criminal offense, including a misdemeanor or felony?

Yes_____ No_____

If yes, please explain, including date(s), type of crime(s) and court(s) in which you were convicted._____

Are there any criminal charges pending against you? Yes_____ No_____

If yes, please explain, including the type of crime(s) and court(s) in which the charges are pending._____

(Not all convictions (or charges) will bar employment. State Law requires us to consider the nature of the offense, the number of convictions and the length of time which has passed since certain convictions. If you are denied employment based on criminal background history, you will be provided with a copy of the information which was used in denying such employment.)

Do you have a valid driver's license? Yes _____ No _____

Please summarize your driving record, including past and pending violations and dates:

(Not all violations (or charges) will bar employment. Sharon Academy employees may be called upon to drive company vehicles, so driving history may be relevant to hiring decisions based on position.)

Have you ever been warned, disciplined or terminated by an employer in the past 5 years?

Yes _____ No _____

If yes, please explain: _____

RECORD OF EDUCATION

	Name and Address of School	Course of Study	# of Years Completed and Type of Diploma	Date of Graduation
High School				
Trade or Vocational School				
College/University				
Other Including Seminars, Courses (please specify)				

Academic Honors, Offices _____

Extracurricular Activities (which may relate to the job you are applying for)* _____

Professional Organizations* _____

**You are not required to list organizations indicating race, color, religion, sex, national origin, age, marital status, or disability.*

Please list all current licenses, certifications or registrations which you possess: _____

Type _____ Number _____ State _____ Expiration date _____

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EMPLOYMENT EXPERIENCE/REFERENCES

Please start with your present or last job and include periods of unemployment for at least the previous ten (10) years. Feel free to add relevant experience greater than 10 years ago.

Employer	Telephone	Dates Employed	Reasons for Leaving
Address (City, State, Zip)			
Job Title	Hourly Rate/Salary	Starting	Final
Supervisor's Name, Title, Phone Number			

May we contact your present employer? Yes _____ No _____

Employer Leaving	Telephone	Dates Employed	Reasons for
Address (City, State, Zip)			
Job Title	Hourly Rate/Salary	Starting	Final
Supervisor's Name, Title, Phone Number			

Employer Leaving	Telephone	Dates Employed	Reasons for
Address (City, State, Zip)			
Job Title	Hourly Rate/Salary	Starting	Final
Supervisor's Name, Title, Phone Number			

Please explain all gaps in employment:

PROFESSIONAL REFERENCES

Please list three references who are not relatives or friends:

Name _____ Telephone _____

Address (Street, City, State, Zip) _____

Name _____ Telephone _____

Address (Street, City, State, Zip) _____

Name _____ Telephone _____

Address (Street, City, State, Zip) _____

Conditions of Application and Employment

As a condition of your application for employment, we will obtain a criminal background check.

As a condition of your employment, you will be required to complete the I-9 form of the Department of Immigration and Naturalization Services and show documentation to verify your identify and employment eligibility. I understand that an offer of employment is not for any specific duration and that any employment based on this application may be terminated by either Sharon Academy or the employee, at any time with or without cause, and that no contract of employment for a specific duration, either express or implied, is intended. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that in the event that I am hired, I am required to abide by all rules and regulations of Sharon Academy.

I acknowledge that consideration for employment is contingent on the results of a reference and background check. Therefore, I hereby authorize Sharon Academy to (1) investigate the truthfulness of all statements made on this application; (2) contact my former employers and other listed references or any other persons who can verify information; and (3) discuss the results of any investigation with other employees of Sharon Academy involved in the hiring process. In addition, I give my consent for all contacted persons, including former employers, to provide information concerning this application. And I release each such person from liability for providing information to Sharon Academy.

I certify that answers given herein are true and complete to the best of my knowledge and I consent to the required tests, reference inquiries and employment standards.

Signature of Applicant _____ Date _____