

# Community Schools of Frankfort Classified Employment Application

**Date:** \_\_\_\_\_

**CHECK POSITION(S) DESIRED:**

*The Community Schools of Frankfort is an equal opportunity employer. Applicants are considered for employment without regard to race, color, national origin, religion, sex, age, handicap, disability, citizenship status, or any other basis prohibited by law, unless such basis constitutes a bona fide occupational qualification. The Community Schools of Frankfort will comply with its legal obligation to provide reasonable accommodation to qualified individuals with disabilities.*

- \_\_\_\_\_ Bus Driver
- \_\_\_\_\_ Custodial
- \_\_\_\_\_ Food Service
- \_\_\_\_\_ Maintenance / Mechanic
- \_\_\_\_\_ Secretarial
- \_\_\_\_\_ Assistant/Paraprofessional

**Name:** \_\_\_\_\_  
Last
First
Middle

**Present Address:** \_\_\_\_\_  
Street
City
State
Zip

**Permanent Address:** \_\_\_\_\_  
If different than above.

**Daytime Phone:** (    ) \_\_\_\_\_ **Evening Phone:** (    ) \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

**High School:** \_\_\_\_\_ **Date Diploma Received:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_

**Education and Training Beyond High School:**

School or Institution	Location	Dates Attended	Area of Study

**REFERENCES**

Name	Address	Phone	Position/Occupation

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying résumé, if any) to provide any relevant information that may be required to arrive at an employment decision.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*This application will be held for 12 months following the date it was completed*

**EMPLOYMENT HISTORY**

Are you currently employed?  Yes  No

Please list your last three employers, starting with the current or most recent employer.

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Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

Describe your work: \_\_\_\_\_

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Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

Describe your work: \_\_\_\_\_

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Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact for reference? \_\_\_\_\_

Describe your work: \_\_\_\_\_

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Have you been convicted or pled guilty to a felony or misdemeanor other than a  Yes  No  
minor traffic violation? *(Conviction or plea will not necessarily disqualify you from employment.)*

If yes, please explain: \_\_\_\_\_

I understand that a criminal history check will be made that could result in a decision not to offer employment.

I understand that the position for which I am applying is an "at will" position, which means that if I am employed by the Community Schools of Frankfort, my employment may be terminated with or without cause at any time.

I certify that this application was completed by me and that all entries on it and all information in it are true and complete to the best of my knowledge. In the event of employment, I understand that false, misleading, or omitted information on my application may result in discharge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please return completed application to: Central Office, 50 S. Maish Road, Frankfort, IN 46041