U.S.D. #411 SCHOOL DISTRICT

Goessel, KS 67053 John Fast, Superintendent (620) 367-4601 Phone (620) 367-4603 Fax

CLASSIFIED STAFF EMPLOYMENT APPLICATION

		Date	20
Notice to Applicant:			
opportunity to qualified indivi	Education of Unified School Distributed under the full realization of equal employers.	ion, color, sex, disab	ility, national origin,
	of employment relationship including apprenticeship, compensation, l		
Name			
(Last Name)	(Last Name) (First Name)		ame)
Address			
(Street)	(City)	(State, Zip	Code)
Phone Number	Position Applying For		
Have you read the job descript job? YesNo	ion, the essential functions of the j	ob and the physical r	equirements of the
Would you accept temporary of	or part-time? YesNo		
Date Available			
	of a felony? YesNo ential letter. Do not include minor	traffic violations(s).	
	EDUCATION		
Name of School	Location	Specialized T	raining Received
High School			-
College			
0.1			

WORK EXPERIENCE

Please list the jobs you h	nave held. List most re	ecent job in the fir	st space.		
Name of Firm or	Address and Ph	one Dates F	Employed	Reason for	
Organization	Number			Leaving	
DI 1' . ' 1	1 1'11				
Please list any special w	ork skills:				
	R	EFERENCES:			
	K	EI EKENCES.			
List below persons who applicants under conside					
requested.	,				
Name and Title		Address and Pl	hana Nur	nhor	
Name and Title		Auui ess ailu i	none Nui	11061	
					_
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AGREEMENT

1.	I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
2.	I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3.	I authorize you to request, receive and verify all information given on this application and I release you from all damages that may result from your doing so.

Date: _____

Unified School District 411 does not discriminate on the basis of sex, race color, national origin, disability or age, in admission or access to, or treatment or employment in, its programs or activities. Any questions regarding the Boards' compliance with Title VI, Title IX, Section 504 or the Americans with Disabilities Act may be directed to the district Compliance officer, who can be reached at 620-367-4601 or the Office for Civil Rights of the Department of Education, telephone (816) 891-8026. The Compliance Officer can also be contacted for the existence and location of accessible services, activities and families.

*Signature:*_____