



La Habra City School District
500 North Walnut Street La Habra, California 90631

COMMITMENT TO EXCELLENCE IN EDUCATION

APPLICATION FOR CLASSIFIED EMPLOYMENT

APPLICANT: PLEASE PRINT IN INK OR TYPE ALL INFORMATION REQUIRED, EVEN IF LISTED IN YOUR RESUME.

POSITION FOR WHICH YOU ARE APPLYING: _____

PERSONAL INFORMATION

Last Name:		First Name:	
Middle Name:	Maiden Name:	SSN:	
Current Address:			
City:	State:	ZIP Code:	
Phone:	Cell Phone:	Date Available:	

EMPLOYMENT INFORMATION

Please list your three most recent employers:

Current Employer:			
Employer Address:		Employment Dates: From _____ To _____	
City:	State:	Zip Code:	
Position:	Phone:	Supervisor:	
	Hourly Salary (Please circle)	Salary:	
Reason for Leaving:			

Employer:			
Employer Address:		Employment Dates: From _____ To _____	
City:	State:	Zip Code:	
Position:	Phone:	Supervisor:	
	Hourly Salary (Please circle)	Salary:	
Reason for Leaving:			

Employer:			
Employer Address:		Employment Dates: From _____ To _____	
City:	State:	Zip Code:	
Position:	Phone:	Supervisor:	
	Hourly Salary (Please circle)	Salary:	
Reason for Leaving:			

If you are not a U.S. Citizen, have you the right to work in the U.S.? _____ Yes _____ No (If no, attach an explanation)

Were you ever a member of the Public Employment Retirement System (PERS)?	
_____ No, I have never participated in PERS	_____ Yes, I have participated in PERS.

EDUCATION
Please list most recent first:

School Name:	Enrolled From _____ to _____
Address:	
Years Completed:	Degree or Certificate:
School Name:	Enrolled From _____ to _____
Address:	
Years Completed:	Degree or Certificate:

REFERENCES
Please list past or present employers or co-workers that we may contact regarding your candidacy for a position with the La Habra City School District. Do not list relatives.

Full Name:	Position:
Company:	Phone:
Full Name:	Position:
Company:	Phone:
Full Name:	Position:
Company:	Phone:

GENERAL INFORMATION

Do you have a valid California Driver's License?	License No.
Do you speak, write or read a language other than English?	Language
Have you ever been convicted of a felony? Or a misdemeanor? (Conviction will not necessarily disqualify an applicant from employment.)	
Are you on court probation at the present time?	
Do you have a physical condition or handicap which may limit your ability to perform the job applied for?	
If so, what can be done to accommodate your limitation?	
Do you have relatives who work for La Habra City School District?	
Relative's Name:	
Offer of employment may be made contingent upon applicant passing a job-related physical examination.	

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above Employment Application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant:	Date:
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Equal employment opportunity shall be provided to all employees and applicants. The La Habra City School District shall not unlawfully discriminate against or tolerate the harassment of employees or job applicants on the basis of their sex, race, color, religious creed, national origin, ancestry, political affiliation, age, marital status, pregnancy, physical or mental disability, medical condition, Vietnam era veteran status, or actual or perceived sexual orientation in its educational programs or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in activities involved in the position or program for which application has been made. Physically or mentally disabled employees or applicants may request reasonable accommodation.

We Are An Equal Opportunity Employer

Applicants – Do Not Write Below This Line – For Office Use Only!

Tests Dates:	Written Score:	Oral Review Score:
Military Credit:	Seniority Credit:	FINAL SCORE:
POSITION ON ELIGIBILITY LIST:	INTERVIEW DATES:	
DATE EMPLOYED:	LOCATION:	