

School District of Springfield Township

1901 East Paper Mill Road • Oreland, PA 19075 • Phone: 215-233-6000 • www.sdast.org

APPLICATION FOR EMPLOYMENT – SUPPORT SERVICES

PERSONAL DATA

Date of Application: _____

Full Name: Miss \ Ms. \ Mrs. \ Mr. _____
LAST NAME FIRST NAME MIDDLE INITIAL

Address: _____
STREET CITY STATE ZIP

Social Security Number: _____ Telephone Number: (_____) _____

E-mail Address: _____

Have you been convicted of a misdemeanor or felony, including child abuse, since your 16th birthday? Yes No

If YES, please explain: _____

Do you have the legal right to work in the United States? Yes No

Positions applied for, please \checkmark as appropriate.

- | | | |
|--|---|--|
| <input type="checkbox"/> Aquatics Aide | <input type="checkbox"/> Custodian | <input type="checkbox"/> Secretary* |
| <input type="checkbox"/> Building Aide | <input type="checkbox"/> Custodian Substitute | <input type="checkbox"/> Secretary Substitute |
| <input type="checkbox"/> Day Care Aide | <input type="checkbox"/> Bus Driver | * Estimate wpm _____ |
| <input type="checkbox"/> Educational Aide | <input type="checkbox"/> Food Services | * Word processing? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Reading Aide | <input type="checkbox"/> Food Services Substitute | * Bookkeeping/Accounting? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Special Education Aide | <input type="checkbox"/> Maintenance Mechanic | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Special Education Sub. Aide | <input type="checkbox"/> Transportation Mechanic | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Health Care Assistant | | |

EDUCATIONAL BACKGROUND

NAME OF SCHOOL	LOCATION	COURSE OF STUDY	GRADUATE
High School _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
Technical or Business School _____			<input type="checkbox"/> Yes <input type="checkbox"/> No
College or Other _____			<input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES (Non-Relative)

NAME	POSITION	ADDRESS	TELEPHONE NO.

OVER

Pennsylvania Child Abuse History, Pennsylvania State Police Criminal History Record, and FBI Federal Criminal History Record submissions are requirements of employment.

FBI Criminal History Record Clearance – Registration #: _____

Please complete all applicable information requested. **DO NOT REFER US TO A RESUME.**

Please list any job related information that, in your opinion, would be helpful to the School District of Springfield Township in considering you for employment.

Reference: (OTHER THAN RELATIVES)

1.	Name		Position	
	Address		Phone Number	

2.	Name		Position	
	Address		Phone Number	

3.	Name		Position	
	Address		Phone Number	

Work Experience: List the most recent employment first.

1.	Employer			
	Address			
	Position(s) Held			
	Beginning Date		Ending Date	
	Job Description			
	Reason for Leaving			
	Contact Employer Yes/No		Reason	

2.	Employer			
	Address			
	Position(s) Held			
	Beginning Date		Ending Date	
	Job Description			
	Reason for Leaving			
	Contact Employer Yes/No		Reason	

3.	Employer			
	Address			
	Position(s) Held			
	Beginning Date		Ending Date	
	Job Description			
	Reason for Leaving			
	Contact Employer Yes/No		Reason	

(If more space is needed, please use an additional sheet of paper.)

Note: We may contact employers listed above unless you indicate those you do not wish us to contact.

Experience working with children (volunteer or paid):

Detail location, dates of services and a brief description of duties.

Computer Training and/or Experience:

Please detail specific computer training you received, dates and location of training. Also, detail any on-the-job experience you may have had. Detail what types of computers and program(s) you have worked with.

Minimum salary required: _____

Date employment could begin: _____

CERTIFICATION AND AUTHORIZATION

Please read carefully before signing. I certify that the information given in this application is true and complete to the best of my knowledge. I authorize the School District of Springfield Township to investigate any information, including my employment history, educational background, credit history, and record of criminal convictions that it believes is relevant to my employment application. My current and former employers, educational institutions, and personal references may provide information that they may have about me in response to inquiry from the School District of Springfield Township. I understand that any offer of employment by the School District of Springfield Township is contingent upon obtaining reference information learned through the above-mentioned reference checks, as well as upon the successful completion of criminal history and background checks. I understand that omitting material, facts, and/or providing false or misleading information or misrepresentations in my application, resume, or during the interview process may result in a refusal to hire, or discharge in the event of employment. I understand that I shall be required to provide documentation establishing my legal authorization for employment within the first three days of my employment. I understand that if employed, my employment will be in accordance with the Public School Code."

Signature

Date

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or disability.