



APPLICATION FOR CLASSIFIED EMPLOYMENT

Groveport Madison Local School District
Classified Personnel Department
4400 Marketing Place, Suite B
Groveport, Ohio 43125
Phone: 614-492-2520
Website: www.gocruisers.org

Date _____

Please Print Clearly

Personal Information

1. Name _____

Last
First
Middle
Maiden
2. Address _____

Street
City
State
Zip Code
3. Home Phone () _____ E-mail _____
 Cell Phone () _____
4. Eligible for employment in the United States? ____ Yes ____ No

Desired Employment (please check all that apply)

____ *Full Time* ____ *Part Time* ____ *Substitute*

____ Educational Aide ____ Custodial ____ Secretary ____ Security

____ Cook ____ Interoffice Mail Delivery ____ Alternative Classroom Monitor

Education

<u><i>Institution: Name and Address</i></u>	<u><i>Graduate?</i></u>	<u><i>Major/Minor</i></u>
High School	Yes No	
College	Yes No	
Trade School	Yes No	
List and describe any other school or specialized training/skill _____		

Work History

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Name of Employer _____	Telephone _____
Address _____	Number of Years Employed _____
City, State, Zip Code _____	
Position _____	
Name of Supervisor _____	Telephone _____
Duties: _____	

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Name of Supervisor _____	Telephone _____
Duties _____	

Special Skills

Do you type? Yes No Words Per Minute _____

Have you had any computer or word processing experience or training? Yes No

If yes, please describe _____

Any other special skills you may have _____

References

Give three references, not relatives or former employers.

Name	Address	Phone	Position

Additional Information

Please check appropriate answer:

Yes No

- ___ ___ Have you ever been suspended, dismissed, fired, or discharged from a position of employment?
- ___ ___ Have you ever been asked to resign from a position of employment?
- ___ ___ Have you ever been convicted of any violation of the law other than a minor traffic ticket?
- ___ ___ Are there any reasons why you would not be able to perform any of the essential functions of the job for which you are applying, with or without reasonable accommodations?
- ___ ___ Have you ever been disciplined or received verbal or written warnings for absenteeism or tardiness?

If your answer to any of the above questions is yes, please explain on a separate page and include with this application.

How many days of work (or school) have you missed in the last two years? _____

How many times have you been late for work (or school) in the last two years? _____

- I authorize the Groveport Madison Local School District (the “District”) to investigate any information contained in this application. I authorize any former employer listed on this document to provide the District with any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise. I understand that a background check and fingerprinting will be completed through the Bureau of Criminal Investigation (BCI) in accordance with Section 3319.39 of the Ohio Revised Code. I hereby release all parties from any and all liability for any damage that may result to me from the release of such information.
- I understand that if I am employed prior to the District’s receipt of the BCI report and/or verification of my work experience and education, my continued employment will be conditioned upon: 1) satisfactory work and educational experience as verified by contacts with former employers and/or universities; and 2) receipt of a report demonstrating that I am in compliance with the Board of Education’s rules and regulations regarding applicant/employee criminal records and disclosure of criminal conviction(s) listed in this application.
- I further understand that this application and other District documents are not intended to be contracts of employment, nor does this application obligate the District in any way to employ me.
- The facts set forth in this application for employment are true and complete. I understand that any false statement or omission on this application may result in my disqualification or dismissal from employment.

By affixing my signature, I agree to the conditions listed on this application and will, if employed, tender my resignation of employment should I fail to fulfill these conditions.

Signature of Applicant _____ Date _____

This application shall remain active for 90 days, after which I must re-apply.

****THE GROVEPORT MADISON LOCAL SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER****

(For Office Use)

Interviewed by _____

Date of interview _____

BCI Yes No

TB Yes No