

375 Lee Street Alexander City, AL 35010 (256) 234-8600



APPLICATION FOR THE POSITON OF

Support Personnel Application

Instructions: Complete the application in your own handwriting. Do not omit any information that would be of assistance to us in evaluating your application. Return the following items with your completed application: Three reference letters, copy of high school diploma or GED, and documentation of any collegiate, trade or technical school training you have received. NOTE: Effective January 2002, all instructional aides must have 48 semester hours of post-secondary education or passing scores on Work Keys Assessment.

It is the policy of the Alexander City Board of Education that no person shall, on the grounds of race, color, disability, sex, religion, creed, nationality, origin, or age be excluded from participation in, be denied the benefits of, or be subjected to discrimination under program, activity, or employment.

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|--|--|---|---|
| 1. Name | | | |
| Last | First | Middle | |
| 2. Address | | | |
| Street | | | Decent Photo |
| C:h. | | | Recent Photo (Optional) |
| City | State | Zip | |
| Social Security Number | Date of | of Birth | |
| | | | |
| 4. Home Number | Cell Phone Number | er | 1 |
| Are you a U.S. Citizen?Yes (If no, are you eligible to work in | ;No i the U.S.?)Yes | No | |
| Have you ever been convicted turpitude?YesNo If yes, please explain: | | | |
| Are you presently employed? | _YesNo (If y | yes, please complete the folio | owing): |
| Employer | · · · · · · · · · · · · · · · · · · · | Address of employer | |
| Position | | | |
| 9. Do you have any health condition | ons that would limit your e lease explain on a separa | | ne school System? |
| Bus driver applicants will have by the Alabama Department or | their driving records chec f Public Safety. Certificate | cked for violations, CDL license or school bus driver license | se reviewed as applicable, and reported |
| 11. Bus driver applicants: Current | | | |

| 2. List any special Alabama Public S attach a copy) | Schools certific | ate that yo | u possess such as Alabama Substitu | e or Regular Teaching |
|--|------------------------|---------------|------------------------------------|--------------------------------------|
| .,, | | | | |
| 3 EDUCATION / TRAINING /copy | of transcript/dir | loma roqu | irad\ | |
| 13. EDUCATION / TRAINING (copy of transcript/diploma rec DATES | | | ired) | |
| Name of School/Institution | From Mo. Yr. | TO Mo. Yr. | Month/Year of Graduation | Certificate/Degree Earned |
| ligh School / GED | | | | |
| rade/Technical Schools /Colleges | | | | |
| | | | | |
| ist any special recognition or honors | gained as a st | udent | | |
| 4. WORK EXPERIENCE | | | | |
| List Employer and Address | Dates | | List Supervisor and Phone | Job Title |
| | FROM | ТО | | |
| | Mo. Yr. | Mo. Yr. | | |
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| ist any special recognition or honors | gained as an | | | |
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| 5. References: List three reference | s. <u>Include a le</u> | etter from | each. | 5.4 |
| Name and Address | | | Position Title | Telephone Number (include area code) |
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| propriately quained in the position for which they are a achieve these objectives, the school district shall con- ucation. By signing this application, I authorize the sca d conduct other investigations as appropriate. | community it serves to employ those persons who will be the most employed and serve their duties according to the highest ethical standduct investigations including verification of prior employment history shool district to verify all information in this application, to check refer |
|--|---|
| ciose information requested in this application or falsi m employment or cause my dismissal. Further, I agree | ovided is true and complete to the best of my knowledge. My failure to ification of statements and facts may be sufficient reason to disqualify e that if employed I will abide by the policies and regulations of the boactivities such as, but not limited to parent-teacher organizations, sch |
| PLICANT'S SIGNATURE | DATE |