SUPPORT PERSONNEL APPLICATION

Opp City Schools

P.O. Box 840, Opp, AL 36467 334-493-3173

		PERSUNAL III	NFORMATION				
FIRST NAME		LAST NAME		PHONE	PHONE NUMBER		
ADDRESS							
CITY STATE			ZIP				
		EMAIL					
HAVE YOU EVER BEEN INVOLUI DISCHARGED FROM A POSITION		Yes No	IF YES, WHEN?				
EMPLOYMENT DESIRED							
POSITION 1			POSITION 2				
PREVIOUSLY EMPLOYED WITH OPP CITY SCHOOLS?	☐ Yes	□ No	IF YES, WHEN?				
ARE YOU CURRENTLY EMPLOYED?	☐ Yes	☐ No	AVAILABILITY DATE				
		EDUO	ATION				
EDUCATION							
DEGREE/COURSE		UNIVERSITY/I	NSTITUTE		YEAR OF GRADUATION		
EMPLOYMENT INFORMATION: Please list your employment history, beginning with your most recent employer. (You must complete this							
section even if you	attach a resume	e. A resume must b	e attached for secretari	al and I	bookkeeper positions.		
PREVIOUS EMPLOYMENT							
PRESENT OR LAST EMPLOYER			DATES EMPLOYED		PHONE NUMBER		
REASON FOR LEAVING			POSITION/				
			DUTIES				
EMPLOYER			DATES EMPLOYED		PHONE NUMBER		
REASON FOR LEAVING			POSITION/ DUTIES				
EMPLOYER			DATES EMPLOYED		PHONE NUMBER		
REASON FOR LEAVING			POSITION/ DUTIES				

OPP CITY SCHOOLS CONDUCTS REFERENCE CHECKS. PLEASE LIST PROFESSIONAL REFERENCES ON THE NEXT PAGE.

REFERENCES						
NAME:	PHONE NUMBER:					
EMAIL ADDRESS:						
NAME:	PHONE NUMBER:					
EMAIL ADDRESS:						
NAME:	PHONE NUMBER:					
EMAIL ADDRESS:						
SKILLS 3.						
2.		4.				
MILITARY SERVICE						
WERE YOU IN THE ARMED YES NO	IF YES, WHAT BRANCH?					
DATES OF DUTY:						
RANK AT DISCHARGE						
LIST DUTIES INCLUDING SPECIAL TRAINING:						
HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES, Yes No						
WHICH HVAE NOT BEEN ANNILLED, EXPUNGED OR SEALED BY A COURT? IF YES, ATTACH A SHEET DESCRIBING THE EVENT IN DETAIL.						
DO YOU HOLD A VALID ALABAMA DRIVER'S LICENSE? Yes	☐ No NUMBER					
IF APPLYING FOR A MAINTENACE OR BUS DRIVER POSITION, OPP CITY SCHOOLS WILL VERIFY YOUR DRIVING RECORD.						
HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED?	□ No IF YES, WHY?					
DO YOU HAVE ANY RESTRICTIONS ON YOUR DRIVER'S LICENSE?	No IF YES, WHAT?					
PLEASE READ THE FOLLOWING CAREFULLY. YOU - THE APPLICANT - ARE RESPONSIBLE FOR ADHEARING TO THE FOLLOWING GUIDLINES.						
A FALSE ANSWER TO ANY PORTION OF THE THIS APPLICATION MAY INVALIDATE THE CONTRACT						
I understand that this application is valid for three years from the date of completion. At that time, it is my responsibility to complete a new application to receive consideration, it understand that my application will be discarded after it has become inactive.						
 application to receive consideration. i understand that my application will be discarded after it has become inactive. I certify that the answers given by me in this application are true and correct without omissions of any kind. I agree that the school system shall not be held liable in any respect if my employment is terminated because of false statements, answers or omission made by me in this 						
 application. I authorize Opp City Schools to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation, or government agency to disclose to the school district any information they have regarding me. 						
• In consideration of the school district's review of the application, I hereby release the district as well as all providers of information from any liability and for any damage that may result from the furnishing and receiving of this information. A copy of this authorization and release is						
 as valid as the original and should be recognized as such. I understand that if I am recommended for a position, the Alabama State Department of Education will require me to submit a completed background check packet and fees. The cost of this background check is \$49.00. 						
I have read and understand the guidelines above and agree to abide by them.						
DATE :	SIGNATURE :					
Discrimination on the basis of sex, race, age, religious belief, disability, national origin, or ethnic group shall be prohibited in all educational programs and activities of the Opp City Schools.						

OPP CITY SCHOOLS P.O. BOX 840 OPP, ALABAMA 36467 (334) 493-3173