



CLATSKANIE SCHOOL DISTRICT 6J
 PO Box 678, Clatskanie OR 97016
 (503)728-0587 (503)728-0608 FAX

CLASSIFIED EMPLOYMENT APPLICATION
 (complete in your own handwriting)

Legal Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

Position Desired: _____

EDUCATION

SCHOOL	LOCATION	DATES ATTENDED	HIGHEST DEGREE
HIGH			
COLLEGE			
OTHER			

*Are you eligible to work in the US? Yes No

*Have you ever been convicted of a felony? Yes No

(If you answer "Yes", attach a written statement to this application explaining the circumstances in detail)

*In the past seven years, have you been convicted of a misdemeanor that resulted in imprisonment?

Yes No (If you answer "Yes", attach a written statement to this application explaining the circumstances in detail)

*Are you a veteran as defined under Oregon Law (ORS 408.225(e))? Yes No

If you answered "Yes" to this question, your service record should be reflected in the Employment Experience section of your application.

*Are you a "Disabled Veteran" as defined under Oregon Law (ORS 408.225(c))? Yes No

If you answer "Yes" to this question, your service record should be reflected in the Employment Experience section of your application.

WORK RELATED REFERENCES

(Include only names of supervisors or people who know of your work performance. Do not list relatives or friends. Include complete contact information)

NAME/JOB TITLE	ADDRESS	PHONE NUMBER

EMPLOYMENT EXPERIENCE

List all present and past employment experience, beginning with most recent employment - attach a separate sheet, if necessary. All experience is subject to verification.

May we contact your previous employers as a reference? Yes No

COMPANY NAME/ADDRESS	DATES EMPLOYED		JOB TITLE
	From:	To:	
SUPERVISOR/TITLE/PHONE NUMBER		PRIMARY DUTIES	
REASON FOR LEAVING:			

#2

COMPANY NAME/ADDRESS	DATES EMPLOYED		JOB TITLE
	From:	To:	
SUPERVISOR/TITLE/PHONE NUMBER		PRIMARY DUTIES	
REASON FOR LEAVING:			

#3

COMPANY NAME/ADDRESS	DATES EMPLOYED		JOB TITLE
	From:	To:	
SUPERVISOR/TITLE/PHONE NUMBER		PRIMARY DUTIES	
REASON FOR LEAVING:			

-Some positions in this district have specific physical requirements. If you are applying for such a position, you will be asked about any physical limitations or disabilities that would be dangerous to you or your fellow employees if you were to fill this particular position. A physical examination may be required. Other positions may not be held by persons convicted of certain crimes. If you are hired, fingerprinting is mandatory. A personal interview is required before employment.

-I understand that all employment is with the district and not at a particular school.

-I certify the information I have given on this application is correct to the best of my knowledge. Untruthful or misleading answers are grounds for dismissal.

Applicant's Signature _____ Date _____

*Clatskanie School District 6J does not discriminate on the basis of age, sex, sexual orientation, race, religion, color, national origin, disability or marital status. Special accommodation requests can be made 24 hours in advance by calling Dr. Lloyd Hartley, Superintendent of Clatskanie School District at 503-728-0587 ext. 2003. Offices are located at 815 S Nehalem Street, Clatskanie, OR 97016. Complaints alleging discrimination, based on sex or disability, can be made by contacting the building principal. Policy AC and the administrative rules that support it are on the Clatskanie School District website under School Board, Policy and Procedures, Online Policy Manual, section A/B, policy AC and AC-AR.