CLASSIFIED PERSONNEL APPLICATION

Hazard Independent Schools

705 Main Street
Hazard, KY 41701
(606) 436-3911
www.hazard.kyschools.us

Hazard Independent Schools is an Equal Opportunity Employer and does not discriminate on the basis of race, gender, religion, age, national origin or disability.

IMPORTANT: Before consideration for employment, the candidate must have the following on file with the Hazard Independent Schools Board of Education Office:

1. Completed application form
2. High school diploma, GED, or documentation of enrollment and satisfactory progress in a GED program

If offered employment, the candidate must have the following on file with the Hazard Independent Schools Board of Education Office prior to beginning work:

1. Physical examination (on district-approved form)
2. TB skin test
3. Substance abuse test
4. Criminal background check

Date: _____

APPLICANT INFORMATION

Last Name: _____ First Name: _____ Middle : _____

Present Address: _____

Phone: _____

Email: _____

APPLYING FOR THE POSITION OF

_____

Interested in being a Substitute?

☐ Yes ☐ No

REFERENCES

These should be persons qualified to answer questions concerning your fitness for the position you seek. Include individuals who have first-hand knowledge of your character, qualifications, and work habits.

	Name	Address	Phone	Position
1				
2				
3				

EDUCATION / TRAINING

Name of Institution	Dates Attended	Degree / Diploma Received	Major / Minor
	From: To:		
	From: To:		
	From: To:		

EXPERIENCE

Begin with the most recent.

Employer Name & Address	Dates Employed	Position and Duties	Reason for Leaving
Employer Name: Address: Supervisor: Phone:	From: To:		
Employer Name: Address: Supervisor: Phone:	From: To:		
Employer Name: Address: Supervisor: Phone:	From: To:		
Employer Name: Address: Supervisor: Phone:	From: To:		
Employer Name: Address: Supervisor: Phone:	From: To:		

ADDITIONAL INFORMATION

List any activities, special skills, certifications, or honors that you would like for us to be aware of:

_____

_____

_____

EMPLOYMENT QUESTIONS

☐ Yes ☐ No Have you ever been arrested for, charged with, or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than $100.)

☐ Yes ☐ No Do you give us permission to contact your present employer regarding your application?

If no, explain: _____

☐ Yes ☐ No Are you under contract at the present time?

Where? _____

Beginning Date: _____ Ending Date: _____

☐ Yes ☐ No Have you served in the U.S. Armed Forces?

Branch of Service: _____

Beginning Date of Duty: _____ Ending Date of Duty: _____

☐ Yes ☐ No Have you ever been employed by Hazard Independent Schools?

Position/Location: _____

Beginning Date: _____ Ending Date: _____

Reason for Leaving: _____

☐ Yes ☐ No Are you related to a Hazard Independent Schools Board of Education member or the Superintendent?

Related To: _____

Relationship: _____

BUS DRIVER APPLICANTS ONLY

Operator's License #: _____

CDL #: _____

Other License/Certification: _____

State: _____

Have you had any vehicle accidents during the past three years? ☐ Yes ☐ No

If yes, provide approximate date(s):

Have you been arrested for a moving traffic violation during the past three years? ☐ Yes ☐ No

If yes, provide approximate date(s):

Has your driver's license ever been suspended or revoked? ☐ Yes ☐ No

PLEASE READ BEFORE SIGNING

By signing this application, I declare that the information provided is complete and true to the best of my knowledge. I understand that any falsification, misrepresentation, or omission on this application or during the interview process may be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

The application will be given every consideration; however, receipt of this application does not imply that the applicant will be employed.

Applications will be retained on file for two (2) years.

I acknowledge that I have read and understand the above statement.

Applicant Signature: _____ Date: _____