

PREVIOUS EMPLOYMENT CONTINUED

(attach additional sheet if necessary)

Dates (From-To)	Former Employer Name/Address	Position Title	Reason for Leaving

DESCRIBE YOUR QUALIFICATIONS FOR THIS POSITION:

REFERENCES

Please include people for whom you have worked, those who know your ability and character, and those who are qualified to answer questions concerning your fitness for the position you seek.

Name	Position or Relationship	Telephone

NOTICE TO APPLICANTS: Jefferson School District 14J complies with Equal Opportunity, Title IX, Americans with Disabilities Act and Affirmation Action Regulations. Reasonable accommodation for the application and interview process will be provided upon request and as required in accordance with the Americans with Disabilities Act of 1990.

Jefferson School District Board Policy GBK/JFCG/KGC prohibits the use of *any* form of tobacco by any individual on school property.

This application will be kept on file one calendar year from the date on which it is received.

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The facts set forth on this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I hereby grant to the District or its agent permission to verify any statement made on this application.

Signature: _____ Date _____

Jefferson School District 14J
 1328 North 2nd Street
 Jefferson, OR 97352
 Telephone: 541-327-3337, ext. 1051
 FAX: 541-327-2960

EQUAL OPPORTUNITY INFORMATION

Oregon school districts are equal opportunity employers and comply with all applicable state and federal statutes and regulations in employment and school district programs.

Drug-Free Workplace: Oregon school districts are committed to maintaining drug-free workplaces and comply strictly with all applicable state and federal statutes and regulations in employment and school district programs.

Name

Position for which you are applying

If you prefer not to provide the information requested below, please sign and date.

Signature

Date

VOLUNTARY INFORMATION

This information is voluntary and is collected only for Equal Employment Opportunity reporting purposes. This form will be physically separated from your other application materials and will not affect the application process in any manner. Should you prefer not to provide this information, there will be no effect on your application.

Sex

- Female
 Male

Date of Birth: _____/_____/_____

Are you Hispanic or Latino? Yes No

Check all races that apply:

- American Indian or Alaskan Native
 Asian
 Black or African American
 Native Hawaiian or Other Pacific Islander
 White

This page is not part of your application. It is a means of gathering EEOC and other voluntary information for data collection.