

Community High School District No. 94, DuPage County
326 Joliet Street
West Chicago, IL 60185-3142

Educational Support Personnel Employment Application

Name _____
Last First Middle

Address _____
Street Address City State Zip Code

Social Security # _____ Phone # _____ () _____

Position Desired:

- | | |
|--|---|
| <input type="checkbox"/> Secretary/Clerical | <input type="checkbox"/> Lunchroom Supervisor |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Custodial |
| <input type="checkbox"/> Program Assistant | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Student Supervisor/Dean's Assistant | |

Hours Desired:

- Full Time Part Time Substitute

When would you be available to start work? _____

Have you worked for Community High School District #94 before? Yes _____ No _____

If yes, when? _____ What was your position? _____

Please list your reason for leaving _____

Have you been convicted of a felony? No ___ *Yes ___, [date and nature of violation(s)] _____

*No applicant for employment will necessarily be rejected because of a conviction of a criminal offense. The date and nature of the offense, the requirements of the position for which applicant is applying as well as the applicant's qualifications will be considered pursuant to section 10-21.9 of the Illinois School Code.

Education: High School(s) and College(s) Attended:

Name of Institution	City/State	Dates/From-To	Degree-Mo/Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Skills:

Please list any skill or job experiences that contribute to your qualification for the specific position for which you are applying:

May we contact your previous and current employers? _____ Yes _____ No

Previous Work Experience: (Please list prior employment beginning with the most recent)

Employer _____ Immediate Supervisor _____

Address _____ Phone # (____) _____

Job Title _____ Date Started _____ Date Ended _____

Reason(s) for Leaving _____

Employer _____ Immediate Supervisor _____

Address _____ Phone # (____) _____

Job Title _____ Date Started _____ Date Ended _____

Reason(s) for Leaving _____

Employer _____ Immediate Supervisor _____

Address _____ Phone # (____) _____

Job Title _____ Date Started _____ Date Ended _____

Reason(s) for Leaving _____

References: (Name three persons who can attest to your qualifications and skills)

Name	Relationship	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please Read The Following Carefully Before Signing:

Community High School District #94 is an Equal Opportunity Employer and does not discriminate on the basis of sex, age, race, creed, color or national origin, or disabling condition.

The applicant certifies the information on this application is accurate and true. The applicant has been informed that if the applicant is employed and if it is later determined that false or inaccurate information is supplied, the applicant is subject to immediate dismissal. The School Code of the State of Illinois requires a criminal background investigation for all District #94 employees. All hiring is subject to that investigation.

I hereby warrant that I have not been convicted of any criminal offense specified in Section 10-21.9 of the Illinois School Code.

I authorize the release and full disclosure of any or all information that you have concerning me, including information of a confidential or privileged nature, to any duly authorized agent of the Community High School District. I hereby release you, your organization or others from liability or damage which may result from furnishing the information. A copy of this authorization and release is as valid as the original and should be recognized as such.

Signature _____

Date _____