



ST. MARY'S MONTESSORI SCHOOL APPLICATION FOR EMPLOYMENT

POSITION FOR WHICH YOU ARE APPLYING

6880 VICTORIA WINDROWS LOOP
RANCHO CUCAMONGA, CA 91739

(PRINT THE EXACT TITLE OF POSITION FOR WHICH YOU ARE APPLYING)

FULL TIME PART TIME TEMPORARY

APPLICATION INSTRUCTIONS

PLEASE READ THE JOB ANNOUNCEMENT TO DETERMINE IF YOU POSSESS THE NECESSARY QUALIFICATIONS FOR THE JOB. YOU WILL ONLY BE CONSIDERED FOR EMPLOYMENT IF THIS APPLICATION IS COMPLETED IN ITS ENTIRETY. IF YOU CHOOSE NOT TO COMPLETE THIS FORM ELECTRONICALLY, PLEASE PRINT LEGIBLY USING BLUE OR BLACK INK. ANSWER ALL QUESTIONS ACCURATELY AND COMPLETELY. ALL STATEMENTS IN YOUR APPLICATION ARE SUBJECT TO VERIFICATION AND INCORRECT OR INCOMPLETE STATEMENTS MAY BAR OR REMOVE YOU FROM ELIGIBILITY FOR EMPLOYMENT. READ THE *CERTIFICATE OF APPLICANT* CAREFULLY BEFORE SIGNING.

PERSONAL DATA

NAME (LAST, FIRST, MIDDLE INITIAL)		SOCIAL SECURITY NUMBER	
HOME ADDRESS (NUMBER AND STREET)			
CITY, STATE, ZIP CODE		(AREA CODE) HOME TELEPHONE	
E-MAIL ADDRESS	(AREA CODE) WORK TELEPHONE	(AREA CODE) CELLULAR TELEPHONE	
DO YOU HAVE A VALID DRIVER'S LICENSE	STATE	NUMBER	CLASS EXP. DATE
<input type="checkbox"/> YES <input type="checkbox"/> NO			DATE OF BIRTH:

EDUCATION AND TRAINING

CIRCLE HIGHEST GRADE COMPLETED	NAME AND LOCATION OF HIGH SCHOOL	DID YOU GRADUATE (CIRCLE ONE)?
1 2 3 4 5 6 7 8 9 10 11 12	_____	YES NO GED
13 14 15 16 17 18 More	_____	

NAME / LOCATION OF SCHOOLS ATTENDED (OTHER THAN HIGH SCHOOL)	DATES ATTENDED	CREDITS EARNED (SEM / QTR)	DEGREE AWARDED (YES / NO)	TYPE OF DEGREE
	/			
	/			
	/			

PLEASE DESCRIBE ADDITIONAL WORK, TRAINING, CERTIFICATES, LICENSES, AND / OR MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS THAT WOULD QUALIFY YOU FOR THIS POSITION.

PLEASE DESCRIBE OTHER PERTINENT SKILLS YOU HAVE, SUCH AS WORD PROCESSING, COMPUTER, MACHINE / EQUIPMENT OPERATIONS, OR FOREIGN LANGUAGE SKILLS.

ARE YOU ABLE TO CARRY UP TO 45 lbs.? YES NO

IF NO PLEASE PROVIDE EXPLANATION _____

PRINT NAME	LAST	FIRST	MIDDLE
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EMPLOYMENT HISTORY

WORK EXPERIENCE: PLEASE LIST YOUR EMPLOYMENT HISTORY FOR THE LAST 10 YEARS, INCLUDING ANY PERIODS OF UNEMPLOYMENT, BEGINNING WITH THE MOST RECENT POSITION YOU HAVE HELD. BE SURE TO INCLUDE ALL EXPERIENCE (PAID, VOLUNTEER, MILITARY) WHICH RELATES TO THE POSITION FOR WHICH YOU ARE APPLYING. USE ADDITIONAL SHEETS IF NECESSARY.

CANDIDATES ARE ENCOURAGED TO SUBMIT ADDITIONAL INFORMATION TO ASSIST WITH THE EVALUATION PROCESS.

FROM (MONTH / YEAR):	JOB TITLE:	EMPLOYER (BUSINESS OR AGENCY NAME):
TO (MONTH / YEAR):	YOUR DUTIES:	EMPLOYER ADDRESS:
TOTAL TIME (IN YEARS):		_____
NO. SUPERVISED (IF ANY):		NAME / TITLE OF SUPERVISOR:
SALARY:		SUPERVISOR TELEPHONE:
\$ _____ PER <input type="checkbox"/> HR. <input type="checkbox"/> WK. <input type="checkbox"/> MO.		HOURS WORKED PER WEEK:
REASON FOR LEAVING:		MAY WE CONTACT YOUR FORMER EMPLOYER:
		<input type="checkbox"/> YES <input type="checkbox"/> NO
FROM (MONTH / YEAR):	JOB TITLE:	EMPLOYER (BUSINESS OR AGENCY NAME):
TO (MONTH / YEAR):	YOUR DUTIES:	EMPLOYER ADDRESS:
TOTAL TIME (IN YEARS):		_____
NO. SUPERVISED (IF ANY):		NAME / TITLE OF SUPERVISOR:
SALARY:		SUPERVISOR TELEPHONE:
\$ _____ PER <input type="checkbox"/> HR. <input type="checkbox"/> WK. <input type="checkbox"/> MO.		HOURS WORKED PER WEEK:
REASON FOR LEAVING:		MAY WE CONTACT YOUR FORMER EMPLOYER:
		<input type="checkbox"/> YES <input type="checkbox"/> NO
FROM (MONTH / YEAR):	JOB TITLE:	EMPLOYER (BUSINESS OR AGENCY NAME):
TO (MONTH / YEAR):	YOUR DUTIES:	EMPLOYER ADDRESS:
TOTAL TIME (IN YEARS):		_____
NO. SUPERVISED (IF ANY):		NAME / TITLE OF SUPERVISOR:
SALARY:		SUPERVISOR TELEPHONE:
\$ _____ PER <input type="checkbox"/> HR. <input type="checkbox"/> WK. <input type="checkbox"/> MO.		HOURS WORKED PER WEEK:
REASON FOR LEAVING:		MAY WE CONTACT YOUR FORMER EMPLOYER:
		<input type="checkbox"/> YES <input type="checkbox"/> NO

PRINT
NAME

LAST

FIRST

MIDDLE

ADDITIONAL INFORMATION

NOTE: ANSWERING "YES" TO ANY OF THE FOLLOWING QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS YOUR AGE AT THE TIME OF THE OFFENSE, THE SERIOUSNESS AND NATURE OF THE VIOLATION, AND REHABILITATION WILL BE TAKEN INTO ACCOUNT. DO NOT ANSWER "YES" TO QUESTION "E" IF ANY OF THE FOLLOWING APPLY: MINOR TRAFFIC INFRACTIONS AND CONVICTIONS FOR WHICH THE RECORD HAS BEEN SEALED OR EXPUNGED; ANY CONVICTION FOR WHICH PROBATION HAS BEEN SUCCESSFULLY COMPLETED OR OTHERWISE DISCHARGED AND THE CASE HAS BEEN JUDICIALLY DISMISSED; REFERRALS TO AND PARTICIPATION IN ANY PRE-TRIAL OR POST-TRIAL DIVERSION PROGRAMS; AND MARIJUANA RELATED OFFENSES THAT OCCURRED OVER TWO YEARS AGO.

- A. HAVE YOU EVER BEEN THE SUBJECT OF A MISCONDUCT INVESTIGATION BY AN EMPLOYER?
 NO YES (IF YES, PLEASE STATE DETAILS*)
- B. HAS AN EMPLOYER EVER PROPOSED THAT YOU BE REPRIMANDED, DEMOTED, SUSPENDED, OR DISMISSED?
 NO YES (IF YES, PLEASE STATE DETAILS*)
- C. HAVE YOU EVER BEEN REPRIMANDED, DEMOTED, SUSPENDED, OR DISMISSED?
 NO YES (IF YES, PLEASE STATE DETAILS*)
- D. HAVE YOU EVER RESIGNED FROM EMPLOYMENT AS AN ALTERNATIVE TO BEING DISMISSED?
 NO YES (IF YES, PLEASE STATE DETAILS*)
- E. HAVE YOU EVER PLED GUILTY OR "NO CONTEST" TO, OR BEEN CONVICTED OF, A MISDEMEANOR OR FELONY?
 NO YES (IF YES, PLEASE STATE DETAILS*)
- F. AS THE RESULT OF AN ARREST, ARE YOU PRESENTLY RELEASED ON BAIL OR ON YOUR OWN RECOGNIZANCE PENDING TRIAL?
 NO YES (IF YES, PLEASE STATE DETAILS*)

* **IF YOU ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, PLEASE PROVIDE A WRITTEN EXPLANATION AS TO THE FACTS AND DATES SURROUNDING YOUR ANSWER ON THE FOLLOWING PAGE.**

IF OFFERED EMPLOYMENT, APPLICANTS WILL BE REQUIRED TO SUBMIT PROOF OF LEGAL U.S. RESIDENCY AND BE FINGERPRINTED & PASS A MEDICAL EXAMINATION, INCLUDING A DRUG SCREEN (PAID FOR BY THE COMPANY) PRIOR TO BEGINNING EMPLOYMENT. ANY PAST CONVICTION RECORDS WILL BE CHECKED. THE COMPANY PROHIBITS SMOKING ON THE PROPERTY AND IN VEHICLES. FAILURE TO COMPLETE THE APPLICATION FOR EMPLOYMENT HONESTLY AND TRUTHFULLY MAY BE CAUSE TO REJECT YOUR APPLICATION AND / OR TERMINATE YOUR EMPLOYMENT.

CERTIFICATE OF APPLICANT: "I CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION AND ATTACHMENTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE THE COMPANY TO MAKE INVESTIGATIONS AND INQUIRES THAT ARE RELATED TO THE REQUIREMENTS FOR THE POSITION FOR WHICH I AM APPLYING, INCLUDING THAT OF MY EMPLOYMENT, FINANCIAL, AND MEDICAL HISTORY, AND ANY OTHER RELATED MATTERS. IN ARRIVING AT AN EMPLOYMENT DECISION, I HEREBY RELEASE EMPLOYERS, SCHOOLS, OR PERSONS FOR ANY LIABILITY IN RESPONDING TO INQUIRIES IN CONNECTION WITH MY APPLICATION FOR EMPLOYMENT. I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION, OR IN ANY STEP OF THE EMPLOYMENT SELECTION PROCESS OR SUBSEQUENT EMPLOYMENT, WILL SUBJECT ME TO DISQUALIFICATION OR DISMISSAL. I UNDERSTAND ALSO THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE COMPANY.

SIGNATURE: _____

DATE: _____

"THE SCHOOL IS AN EQUAL EMPLOYMENT OPPORTUNITY / AFFIRMATIVE EMPLOYER AND COMPLIES WITH TITLE VII OF THE CIVIL RIGHTS ACT AS AMENDED AND ALL OTHER APPLICABLE STATE AND FEDERAL LAWS PROHIBITING DISCRIMINATION. IT IS THE SCHOOL'S POLICY TO MAKE EMPLOYMENT DECISIONS WITHOUT REGARD TO RACE, GENDER, COLOR, ETHNICITY, RELIGION, NATIONAL ORIGIN / ANCESTRY, AGE, MARITAL STATUS, SEXUAL ORIENTATION, DISABILITY, MEDICAL CONDITION, PREGNANCY, VETERAN'S STATUS, OR ANY OTHER LEGALLY PROTECTED STATUS, OR ASSOCIATION WITH INDIVIDUALS WITH THESE CHARACTERISTICS, EXCEPT WHERE SUCH QUALIFICATIONS ARE BONA-FIDE OCCUPATIONAL QUALIFICATIONS."

APPLICATION FOR EMPLOYMENT: ADDITIONAL INFORMATION FORM

NAME: _____

DATE: _____

ADDITIONAL INFORMATION

IF YOU ANSWERED "YES" TO ANY OF THE *ADDITIONAL INFORMATION* QUESTIONS ON THE PREVIOUS PAGE (A – F), PLEASE PROVIDE A WRITTEN EXPLANATION AS TO THE FACTS AND DATES SURROUNDING YOUR ANSWER.

THE SCHOOL CONDUCTS EXTENSIVE PERSONNEL BACKGROUND CHECKS ON ALL PROSPECTIVE EMPLOYEES. ALL PROSPECTIVE EMPLOYEES MUST SUCCESSFULLY COMPLETE THE FOLLOWING: A MEDICAL EXAMINATION, INCLUDING A DRUG SCREEN BY THE SCHOOL'S DESIGNATED CLINIC; A DEPARTMENT OF JUSTICE REVIEW; FBI CLEARANCE ; A DEPARTMENT OF MOTOR VEHICLES RECORD CHECK; AND REFERENCE & BACKGROUND CHECKS, WHICH DEPENDING ON THE POSITION, MAY INCLUDE BUT ARE NOT LIMITED TO A LEXUS-NEXUS DATABASE SEARCH AND PSYCHOLOGICAL EVALUATION.

I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE.

SIGNATURE: _____

DATE: _____