

Position Applying for

West County Community High School
 1615 Carlson Blvd., Richmond, CA 94804
 (510) 898-1495 Fax: (510) 527-1013
 www.wechschoool.org

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS - Please fill out this form completely as it will assist us in evaluating your application thoroughly. Completing this application is a part of the examination process. If you need additional space, attach a separate sheet. Resumes may be attached to the completed official application form but will not be accepted in lieu of a completed form. WCCHS will make reasonable efforts in the recruitment/examination process to accommodate applicants with disabilities. If you need any accommodation, please call (510) 898-1495.

Full Name _____
Last First Middle

Address _____
No. & Street City State Zip Code

Home Phone () _____ **Work or Message Phone** () _____

Driver's License No: _____ **State Issued:** _____ **Expiration Date:** _____

Social Security No: _____ - _____ - _____ **Will you accept temporary employment?** Yes No

Circle Highest Grade Completed 9 10 11 12		College Degree	Did you receive a High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> G.E.D.			
Name & Location of College or University	Course of Study or Major	Dates Attended From	To	Units Completed Semester	Quarter	Degree & Date of Graduation
Licenses/Certificates obtained which relate to the position applying for				Clerical positions only: Typing Speed		
				Certificate No.	Date Issued	Expiration Date
Other Relevant Courses and Training	Name and Location of Institute	Length	Ended			
List any foreign languages you can speak, read or write fluently.	If not a U.S. Citizen, do you have a work permit from the INS? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A If hired, you will be required to submit proof of permission to work pursuant to Federal Law.					
Are there any reasons you may have difficulty in performing any of the major duties of the job? If so, please explain briefly.	Have you ever been convicted of a felony? (Note: Conviction of a felony may not disqualify you. Qualifications and backgrounds are reviewed in relation to job requirements.) <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name, address and phone number of emergency contact.	Certificate of Applicant: I certify that all statements made in this application are true, and I agree and understand that misstatements or omissions of any material will subject me to disqualification or dismissal					
	Signature of Applicant		Date			

This section must be filled out or your application may not be considered. You may also attach a resume or other relevant documents to further describe your qualifications. Begin with your most recent experience. List all employment in the last ten years. Indicate self-employment, US Military Service and Volunteer Service.

From Mo/Yr	Name/Address/Telephone No. Of Employer:	Job Title	No of Employees Supervised
To Mo/Yr			
Hrs. Per/Wk.	Phone No.	Supervisor Name and Phone No.	
Salary \$ Per/			
Job Duties:			
Reason for Leaving			
From Mo/Yr	Name/Address/Telephone No. Of Employer:	Job Title	No of Employees Supervised
To Mo/Yr			
Hrs. Per/Wk.	Phone No.	Supervisor Name and Phone No.	
Salary \$ Per/			
Job Duties:			
Reason for Leaving			
From Mo/Yr	Name/Address/Telephone No. Of Employer:	Job Title	No of Employees Supervised
To Mo/Yr			
Hrs. Per/Wk.	Phone No.	Supervisor Name and Phone No.	
Salary \$ Per/			
Job Duties:			
Reason for Leaving			
From Mo/Yr	Name/Address/Telephone No. Of Employer:	Job Title	No of Employees Supervised
To Mo/Yr			
Hrs. Per/Wk.	Phone No.	Supervisor Name and Phone No.	
Salary \$ Per/			
Job Duties:			
Reason for Leaving			
May we contact employers you have listed regarding your qualifications, etc.? <input type="checkbox"/>Yes <input type="checkbox"/>No If no, please explain.			

I certify that all statements made in this Application are true & complete. I authorize investigation of all matters herein contained. I agree & understand that any misrepresentation, omission, & falsification of a material fact may be a justification or rejection of my application, refusal of my employment. If employed I agree to furnish verification of my identity & legal right to work in the U.S. I also authorize the employers, schools, individuals named above to provide any additional information regarding my qualifications & character. I hereby RELEASE, HOLD HARMLESS, AND COVENANT NOT TO SUE, West County Community High School, or employees, from any and all claims, damages, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

Signature of Applicant _____ Date _____