



APPLICATION FOR EMPLOYMENT

Date of Application: _____

Position Desired: _____

Salary Desired: _____ Location: _____

Personal Data		
Name (last, first, middle):		Social Security Number:
Present Address:	City/State/Zip:	How long have you resided here?
Previous Address:	City/State/Zip:	How long did you reside there?
Telephone Number:	Are you over the age of 18? () yes () no	If no, employment is subject to verification that you are of minimum legal age.

General Information		
How were you referred to us?	If you were referred by an employee, please list their name:	
Have you ever been employed by Carbon Valley Academy Schools or St. Vrain Valley School District? () Yes () No		
If yes, please list dates of employment.		
Have you ever been employed under any other name other than the one stated on you legal documentation?	If yes, please provide the other name(s):	
Do you have any relatives or friends employed by Carbon Valley Academy Schools?	If yes, please provide their names, relationship and location of employment:	
Are you presently employed?	If yes, what notice will be required?	What date will you be available for employment?
Have you ever been involuntary terminated, or asked to resign from a previous job?	If yes, please explain:	

Certification (Licensed Employees)					
Do you hold an Educator's License? () Yes () No					
If yes, please provide the following:					
License Type	License Number	Issue Date	Expiration Date	Issuing State	Subject or Specialty
License Type	License Number	Issue Date	Expiration Date	Issuing State	Subject or Specialty
License Type	License Number	Issue Date	Expiration Date	Issuing State	Subject or Specialty
If you do not hold an Educator's License, are you eligible to receive one?			Please explain:		
Have you ever had an Educator's License suspended, revoked or not re-issued?			If yes, Please explain:		

Education					
School Name	Address (City, State)	Years Completed (Circle)	Major Field of Study	Graduated (Yes/No)	Degree
High School		1, 2, 3, 4			
College		1, 2, 3, 4			
College		1, 2, 3, 4			
Graduate School		1, 2, 3, 4			
Trade/Correspondence		1, 2, 3, 4			
Other		1, 2, 3, 4			
List scholarships, academic honors and honorary fraternities.				List hobbies and interests.	
Are you planning to continue your education?			If yes, please explain.		

Foreign Language	Indicate degree of fluency
1.	Read _____ Write _____ Speak _____
2.	Read _____ Write _____ Speak _____

Business Skills		
Typing Speed	Word Processing	10-Key
Computer Hardware/Software:		Other business equipment:
List any professional licenses you hold other than teaching:		List any professional organizations you belong to:

Military Service		
Branch	Highest Rank Attained	Dates of Service
Special Training		Did you receive anything other than an honorable discharge?

Driving Record			
Answer these questions if driving is part of the duties and responsibilities of the job for which you are applying			
Do you have a valid Driver's License? () Yes () No	Issuing State	Driver's License Number	Expiration Date
Any restriction(s) on your license? () Yes () No	If yes, please explain:		

Criminal Record	
Answering "yes" to these questions does not constitute an automatic bar of employment. Only those crimes which are substantially related to the position you are seeking will be considered.	
Have you ever been convicted, pled no contest, been placed on probation, enrolled in a pre-trial diversion program, or had adjudication withheld in a criminal offense, felony, misdemeanor or otherwise?	
If yes, please give dates and details for each instance:	
Do you have any criminal charges currently pending?	If yes, please explain:

Employment History (complete in full—do not attach a resume)

Dates of Employment	Total Months	Reason for Leaving	Give full description of responsibilities and duties
Name of Employer		Type of Business	
Address/City/State/Zip		Phone	
Starting Position	Supervisor's Name, Title & Phone	Starting Salary	
Most Recent Position	Supervisor's Name, Title & Phone	Ending Salary	
May we contact?	If not, why?		

Dates of Employment	Total Months	Reason for Leaving	Give full description of responsibilities and duties
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May we contact?	If not, why?		

Please explain any gaps in your employment history:

Previous Experience

Please describe any previous experience that you have in the position for which you are applying, or in any similar or related position:

References

Name	Relationship	Occupation	Phone Number	Years Known

Emergency Contact In case of accident or other emergency, who should we contact?

Name	Relationship	Home Phone	Cell Phone
Address	City	State	Zip
Place of Work	Work Phone		

In compliance with State and Federal Employment Laws, qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, age, marital status, or disability.

The foregoing information will not be used to automatically disqualify an applicant without reference to the nature and seriousness of the offense; the time elapsed since its commission and its job-relatedness.

We are an Equal Opportunity Employer

APPLICANT'S STATEMENT

By my signature below, I certify that all information that I have provided on this application, under separate cover and in any interview, as part of the application process, is true, complete and accurate. I understand that any false statements, omissions or misleading statements will be grounds to not hire me, and if discovered after employment, may subject me to dismissal.

I understand the Carbon Valley Academy is an "at-will" employer, my employment will be for no definite period of time, regardless of the period of payment of my wages. I understand that either party may terminate my employment with the school, at any time for any reason, with or without cause, and with or without a particular form of notice. No one other than the Executive Director has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the school may contact previous employers and I authorize those employers to disclose to Carbon Valley Academy all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of the disclosure of information about me to the school. I also authorize the school to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I understand that if I am selected for employment, Carbon Valley Academy may obtain a consumer report or reports on me and I am required to be fingerprinted by an authorized law enforcement agency. I authorize Carbon Valley Academy to obtain such a report or reports for use in connection with my application for employment and any other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, department of motor vehicle reports, and investigative consumer reports.

By my signature below, I certify that I have read and understand this statement.

PLEASE DO NOT SIGN UNTIL YOU HAVE READ AND COMPLETELY UNDERSTAND THIS STATEMENT

_____ Date

_____ Applicants' Signature