



EMPLOYMENT APPLICATION

MORAVIA COMMUNITY SCHOOL DISTRICT

TODAY'S DATE _____

Moravia Community School District is an equal opportunity employer. Moravia Community School District does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

PERSONAL INFORMATION

Name (Last, First, MI)	Email Address
Street Address	Cell Phone Number
City, State, Zip Code	Home (Other) Phone Number

Are you eligible to work in the United States? ☐ YES ☐ NO

Are you at least 18 years old or older? ☐ YES ☐ NO

Have you ever been terminated from employment or asked to resign by an employer? ☐ YES ☐ NO
(If yes, please provide company name and details on separate sheet of paper.)

Can you work any shift? ☐ YES ☐ NO (If no, explain _____)

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ☐ YES ☐ NO

EMPLOYMENT DESIRED

Position desired _____

Date you can start _____

Are you currently employed? ☐ YES ☐ NO

REFERRAL SOURCE

Have you ever worked for the district before? ☐ YES ☐ NO If yes, when? _____

How did you hear about us? Circle one: Newspaper Ad Social Media Walk-in Referral Other

Incomplete information could disqualify you from further consideration. Please complete all fields.

EDUCATION

(do not complete if you are submitting a resume with this information listed)

Educational Institution	Name of School	# of Years Attended	Degree Received	Subjects Studied / Major
High School				
College or University				
College or University				
Trade or Business School				

EMPLOYMENT HISTORY

(do not complete if you are submitting a resume with this information listed)

Include your last four (4) jobs, starting with the most recent and working backwards.

CURRENT or Most Recent Employer

Company Name	Address, City, State, Zip Code		
Telephone Number	Name of Immediate Supervisor		
DATES OF EMPLOYMENT	TO:	FROM:	May We Contact ? <input type="radio"/> YES <input type="radio"/> NO
Position or Job Title		Reason for leaving	
Briefly describe job duties			

Past Employer

Company Name	Address, City, State, Zip Code		
Telephone Number	Name of Immediate Supervisor		
DATES OF EMPLOYMENT	TO:	FROM:	May We Contact ? <input type="radio"/> YES <input type="radio"/> NO
Position or Job Title		Reason for leaving	
Briefly describe job duties			

Incomplete information could disqualify you from further consideration. Please complete all fields.

Past Employer

Company Name		Address, City, State, Zip Code	
Telephone Number			
DATES OF EMPLOYMENT		TO:	FROM:
		May We Contact ? <input type="radio"/> YES <input type="radio"/> NO	
Position or Job Title		Reason for leaving	
Briefly describe job duties			

Past Employer

Company Name		Address, City, State, Zip Code	
Telephone Number		Name of Immediate Supervisor	
DATES OF EMPLOYMENT		TO:	FROM:
		May We Contact ? <input type="radio"/> YES <input type="radio"/> NO	
Position or Job Title		Reason for leaving	
Briefly describe job duties			

REFERENCES (do not complete if you are submitting a resume with this information listed)

Give the names of four (4) persons not related to you, whom you have known at least three (3) years.

Name	Relationship	Address	Telephone #

Please read carefully before signing:

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for **Moravia Community School District** to hire me. If I am hired, I understand that either **Moravia Community School District** or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of **Moravia Community School District** has the authority to make any assurance to the contrary.

I attest, with my signature below, that I have given to **Moravia Community School District** true and complete information on this application. No requested information has been concealed. I authorize **Moravia Community School District** to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____