

**DISTRICT USE ONLY**

Experience ☐  
Resume ☐  
Certificate ☐  
Cover Letter ☐

**CLASSIFIED EMPLOYMENT APPLICATION**

Position for which you are applying \_\_\_\_\_

**INSTRUCTIONS**

This application is part of your total evaluation. Answer all questions completely and accurately. All statements are subject to verification. You may be dismissed for any false statement. **PLEASE PRINT LEGIBLY. USE ONLY PEN OR TYPEWRITER.** A complete application must be received by the current deadline in order to be considered for the advertised position. In order to be complete, **the application package must include all of the following:** 1) district application, 2) resume, 3) cover letter, and 4) *if required for position*, typing certificate or instructional aide certificate.

Name \_\_\_\_\_ Last 4 digits of Social Security # \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip

Physical Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip

**PERSONAL DATA AND HISTORY**

1. Can you, after employment, submit verification of your legal right to work in the United States? ..... Yes ☐ No ☐

2. Have you ever been convicted of a felony or a misdemeanor? Convictions include a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or a jury. Include convictions for any 'Driving Under the Influence' offense; convictions later dismissed following probation; or convictions for any sex and/or narcotics offenses referred to in Education Code 44011 even if such convictions were later expunged from your record pursuant to Penal Code Section 1203.4. Do not include any misdemeanor marijuana conviction more than two years old or any other conviction that was expunged or sealed by the Court under Penal Code Section 1203.45. (If yes, explain in Section 6.) ..... Yes ☐ No ☐

3. Do you currently have any of the offenses described above pending against you for which you have posted bail or have been released on our own recognizance (O.R.) but which have not yet been settled in a court of law? State law requires that all applicants prior to employment be fingerprinted and prohibits employment of any person convicted of certain sex and narcotic offenses. (If yes, explain in Section 6.) ..... Yes ☐ No ☐

4. Have you ever been discharged, forced to resign, voluntarily resigned with an investigation and/or disciplinary action pending against you, or non-re-elected during a probationary period from any employment? (If yes, please explain in section 6.) ..... Yes ☐ No ☐  
(A "yes" answer to any of the above questions is not an absolute bar to employment.)

5. Have you ever worked for SUHSD before? (If yes, indicate circumstances below) ..... Yes ☐ No ☐

Date(s) of employment \_\_\_\_\_ Department(s) \_\_\_\_\_ School \_\_\_\_\_

6. Explanations/Remarks (attach additional sheets if necessary) \_\_\_\_\_

**EDUCATION AND TRAINING**

- Check the appropriate box if you possess one of the following:  
☐ High School Diploma ☐ G.E.D. Certificate  
☐ High School Proficiency Certificate  
➤ Give highest grade or education level achieved \_\_\_\_\_  
➤ List any other business, trade, or special training that relates to the position (give location and dates): \_\_\_\_\_

**SKILLS AND CERTIFICATION**

1. Do you have a valid Driver's License? Yes ☐ No ☐  
State \_\_\_\_\_ Driver's License Number \_\_\_\_\_ Class (select one) A B C D Expiration Date \_\_\_\_\_

2. Other licenses or certification of professional competence related to the position: \_\_\_\_\_

3. Clerical/Secretarial Skills (if required by the position): Typing Speed \_\_\_\_\_ Shorthand \_\_\_\_\_  
List other skills including machines and equipment you operate \_\_\_\_\_

4. List other skills, abilities, experience which would qualify you for this position, especially computer skills (software programs, type of computers, number of years experience): \_\_\_\_\_

**WORK EXPERIENCE** Begin with most recent experiences and account for all time during the last ten years. Also list any other prior experience relevant to the position for which you are applying. Unless specifically excluded by minimum job requirements, verifiable voluntary experiences may be considered if job related. Use additional sheets, if necessary.

Employer Name	Address/Phone Number	Type of Work	Dates	
			From	To

**REFERENCES** List persons, other than relatives and friends, who have knowledge of your work experience.

Name and Address	Phone	Position	Relationship

For reference purposes, do we have your consent to contact any or all of the employers or references listed on this application? ..... Yes ☐ No ☐  
If no, state reason \_\_\_\_\_

**NOTE:** As a condition of employment, you will be required to be FINGERPRINTED, sign a LOYALTY OATH, produce evidence that you are FREE OF ACTIVE TUBERCULOSIS, pass a PHYSICAL EXAMINATION and submit verification of your LEGAL RIGHT TO WORK IN THE UNITED STATES.

**CERTIFICATE OF APPLICANT**

I HEREBY CERTIFY, that all statements herein are true and correct to the best of my knowledge, and I authorize investigation of all statements herein recorded.....Initial\_\_\_\_\_

My signature below authorizes the Sonora Union High School District to conduct a background investigation in connection with my application for employment. I understand that the District's investigation may include obtaining such information as criminal convictions, driving records, academic records from educational institutions, letters of reference from personal and/or professional sources, employment records from previous employers, and all other relevant information. Accordingly, I authorize my former employer(s), state and federal agencies, and all other personal and/or professional references to release information to the District in connection with my application for employment. I specifically authorize previous employers to release to the Sonora Union High School District all information concerning my employment history. Such information shall include, but not be limited to, investigations that resulted in any type of disciplinary action or investigations that were pending at the time of my voluntary or involuntary termination. ....Initial\_\_\_\_\_

I understand that the Sonora Union High School District will contact references that are given on my application as well as individuals that are not shown on my application. I authorize SUHSD to contact these individuals and absolve the District from any liability in regard to employment references. In addition, I authorize the release of information in regard to my employment and absolve any prior employer or any other individual contacted for a reference from any liability. I agree that this signed form can be faxed to former employers or persons being contacted for a reference and that my faxed signature will serve as an original. If hired, I agree that if I leave SUHSD employment, the District has my consent to give an accurate and truthful reference to any other employers.....Initial\_\_\_\_\_

I understand that any omission or falsely answered statements made by me on this application, or any supplement to it will be sufficient grounds for disqualification or dismissal should I become employed with the school district. ....Initial\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*This District is an equal opportunity employer and complies with the Americans with Disabilities Act. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, handicap or veteran status.*