



Frederick Public Schools EMPLOYMENT APPLICATION

817 N 15th Street Frederick, OK 73542

Frederick Public Schools is an Equal Opportunity Employer

PLEASE PRINT CLEARLY OR TYPE

Date _____

Name: _____

Last
First
Middle

Social Security Number: _____ Birth Date _____ Telephone #: _____

Mailing Address: _____

Street Address, Apt #
City
State
Zip Code

Please circle the position(s) for you which you wish to apply:

Bus Driver Custodian Maintenance Secretary Teacher Assistant Substitute Teacher Other _____

EDUCATIONAL BACKGROUND

Are you a high school graduate or have you passed a general education development (GED) test? Yes _____ No _____
 (Will only be used as required by statute, law or bonafide job requirement)

Are you fluent in any language other than English? List all _____

List colleges, universities or professional schools attended. If more space is needed, attach additional copies of this page. (Transcripts may be required)

| School Name Location | From Month/Year | To Month/Year | Major/Minor or Course of Study | Hours Completed | Degree | Date Completed |
|-------------------------|--------------------|------------------|-----------------------------------|--------------------|--------|-------------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

List any other job-related training or coursework: (vocational, trade, governmental, business, Armed Forces, etc.)

| School Name Location | From Month/Year | To Month/Year | Course of Study | Hours Completed | Date Completed |
|-------------------------|--------------------|------------------|-----------------|--------------------|-------------------|
| | | | | | |
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STATEMENT OF CERTIFICATION By signing this application I certify that the facts contained in this application packet are true and complete to the best of my knowledge. I understand that if I become employed, falsified statements on this application may be grounds for dismissal and/or removal from consideration for eligibility for other state employment or employment examinations. I authorize investigation of all statements and information contained herein. Specifically, I authorize the State of Oklahoma to make all necessary and appropriate investigations allowable by law to verify the information provided. I understand that if I am hired I will be required to produce proof that I have a legal right to work in the U.S.A. in accordance with the Immigration Reform and Control Act of 1986.

 Sign Your Name Here Date

EMPLOYMENT HISTORY

Describe your work experience in detail, beginning with your current or most recent job. Include military service (indicate rank) and volunteer work. List each promotion or transfer as a separate job, even if they were with the same employer. If needed, attach additional copies of this page. All information in this section must be completed. **Resumes cannot be used as a substitute for the completed application.** Employers and supervisors may be contacted regarding your work experience.

Employer's Name and Address _____

Exact Title of Your Position _____

From (Month/Year) _____ To (Month/Year) _____ Supervisor's Name _____

Duties (Be specific - attach extra signed and dated sheets, if necessary): _____

Reason for Leaving _____

Employer's Name and Address _____

Exact Title of Your Position _____

From (Month/Year) _____ To (Month/Year) _____ Supervisor's Name _____

Duties (Be specific - attach extra signed and dated sheets, if necessary): _____

Reason for Leaving _____

Employer's Name and Address _____

Exact Title of Your Position _____

From (Month/Year) _____ To (Month/Year) _____ Supervisor's Name _____

Duties (Be specific - attach extra signed and dated sheets, if necessary): _____

Reason for Leaving _____

REFERENCES

Name Yrs. Known Phone# Address

Name Yrs. Known Phone# Address

Name Yrs. Known Phone# Address

Sign Your Name Here Date