Antietam School District

Administrative Offices – 100 Antietam Road Stony Creek Mills, Reading, PA 19606

Phone: (610) 779-2606 www.antietamsd.org Fax: (610) 779-4424

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICATION FOR SUPPORT EMPLOYMENT

Please Complete	ALL Pages		Date:			
Name:						
Li	ast	First	Middle		Maiden/Alias	
Present Address:						
Telephone:	Number Street	(home)	City	State	Zip Code (cell)	
	ed: (1)		(2)			
Salary desired:						
		ne Only Part-Tim				
Date of Availabil	ty:	Ema	ail address:			
EDUCATION						
	NAME	LOCATION	YEARS COMPLETED		R & DEGREE	
HIGH SCHOOL:						
COLLEGE:		_				
TRADE or						
BUSINESS						
SCHOOLS:						
OTHER:						
		_				
				-		
		at all candidates for e Failure to make full di				
HAVE YOU EVER	BEEN CONVICTED (OF A FELONY?		YES		
If yes, please pro	vide details and dat	es:				

ANTIETAM SCHOOL DISTRICT SUPPORT EMPLOYMENT APPLICATION

	FOR VAN DE	RIVER APPLICANTS ONLY	<u>, </u>	
Do you have a driver's license? _	Yes	No		
Driver's license number:	S	tate of issue: Ope	rator CDL	
Expiration Date:				
Have you had any accidents during	ng the past three (3	s) years? YES N	O If yes, how many?	
If yes, please provide details and	dates:			
Have you had any moving violation	ons during the past	three (3) years? YES	S NO If yes, how many?	
If yes, please provide details and	dates:			
		MILITARY		
HAVE YOU EVER BEEN IN THE ARI	MED FORCES?	Yes	_No	
ARE YOU NOW A MEMBER OF TH	E NATIONAL GUAF	RD?Yes	_ No	
Education/training:		Date entered:	Discharge:	
summarize any additional information n			complete background. Use the space below to becific position you are applying for:	
Please list two (2) references other	er than relatives or	previous employers:		
Name:		Name:		
Position:		Position:		
Company:		Company:		
Address:		Address:		
Telephone: ()		Telephone: ()	

ANTIETAM SCHOOL DISTRICT SUPPORT EMPLOYMENT APPLICATION

Salary (start):	
Final job title:	
used, advancements/promotions while	you worked for this company:
Supervisor:	
Dates (from):	(to):
Salary (start):	(final):
Final job title:	
used, advancements/promotions while	you worked for this company:
Supervisor:	
Dates (from):	(to):
Salary (start):	(final):
Final job title:	
	Salary (start): Final job title: used, advancements/promotions while Supervisor: Dates (from): Salary (start):

ANTIETAM SCHOOL DISTRICT SUPPORT EMPLOYMENT APPLICATION

May we contact your curre	ent employerî	_	Yes	No	
Briefly tell us what attribut	es you have t	hat make	you suited for emp	loyment with the Antietam Sc	hool District:
I certify that all of the state	ements made	by me ar	e true, complete an	d correct to the best of my kno	owledge and belief,
and are made in good faith	n. I understan	d that any	y misrepresentation	of information shall be sufficient	ent cause for: (1)
rejection of my candidacy,	(2) withdraw	al of any	offer of employmen	t, or (3) termination of my em	ployment.
Dated		-	Signa	ature of Candidate (original, in ink onl	y)
origin, sex, disability, age, religio	on, Veteran statu an with Disabiliti	s, or any otles Act, sect	her legally protected clastion 504. Complaints or o	yer and will not discriminate on the besification in accordance with State arquestions should be directed to: Dr. L	d Federal laws, including
Typing skills:	Yes	No	Credei	ntial Check list:	
Words per minute:				Completed application	
Computer skills:	Yes	No		Valid Act 34	
Word Processing:	Yes	No		Valid Act 151	
Excel Spreadsheet:	Yes	No	<u> </u>	Valid Fingerprint file	
Power Point:	Yes	No		Valid Drivers' License	
Page Maker:	Yes	No		I – 9 Form	
				Physical Exam	