



HUNTINGTON SCHOOL DISTRICT 16J

520 Third St. E.
Huntington, OR 97907
(541) 869-2204
FAX (541) 869-2444

CLASSIFIED APPLICATION

Applicants are considered without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related condition or handicap.

(PLEASE TYPE OR PRINT)

Date of application _____

Position(s) Applied for _____

Referral Source: Advertisement Friend Relative Employment Agency Walk-in

Name _____
Last First Middle

Address _____
Number Street City State Zip

Telephone (____) _____ Social Security Number _____

Have you applied here before? Yes No If Yes, give date _____

Have you been employed here before? Yes No If Yes, give date _____

Are you employed now? Yes No May we contact your employer? _____

On what date would you be available to work? _____

List professional, trade, business or civic activities and offices held.

(Exclude those which indicate race, color, religion, sex or national origin):

Give name, address and telephone number of three references who are not related to you and are not previous employers.

Affirmative Action Information

This information is to ensure equal employment opportunity under an affirmative action program. To assist in this program please provide the following information:

- Race or Cultural Group: American Indian Black White Asian
 Spanish American Other _____
- Sex: Female Male

AN EQUAL OPPORTUNITY EMPLOYER

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex, or national origin.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
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Job Title	Hourly Rate/Salary		
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Employer	Dates Employed		Work Performed
	From	To	
Address			
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience _____

Education

	Elementary	High School	College/University	Graduate/ Professional
School Name				
Years Completed: (circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course Of Study:				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				

Honors Received: _____

Agreement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

Signature of Applicant _____

Date _____

For Personnel Department Use Only

Arrange Interview Yes No

Remarks _____

Employed Yes No

Interviewer _____

Date _____

Date of Employment _____

Job Title _____

Hourly Rate/Salary _____ Department _____

By _____

Name and Title

Date _____