CENTERVILLE COMMUNITY SCHOOL DISTRICT

P.O. Box 370 Centerville, Iowa 52544

APPLICATION FOR EMPLOYMENT -- CAFETERIA

I. Pos	ition Desired Food Prep Server	paration					
II.	PERSONAL INFORMATION						
	Name						
	rume	Last	First		Middle		
	Address						
		Street/P.O. Box	City		State	Zip	
	Telephone:	Home		Offic	e		
	Social Security	[,] #					
	EDUCATION School	Name & Location		Years	<u> </u>		
					<u> </u>		
Colle	ge						
Trade, Business, Correspondence School					 		
<u>V.</u> N	MILITARY RECO	ORD					
		Branch		Date	eç		
Checl	k if military servi	ce includes any of the follows		6-25-50 thro 8-5-64 throu 8-2-90 to pre	ugh 1-31-55 gh 5-7-75		

Dates	Name, Address, & Phone of Employer	Salary	Immediate Supervisor
Dutie	es	Reason	for Leaving
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Dutie	aç	Reason	for Leaving
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Please att	tach a complete record or resume of your wo	ork experience	
Are you Are you	on a sex offender registry? on the Department of Human Services' on the Department of Human Services' u ever been convicted of a felony or mis	dependent a	
If yes, p	lease provide date, incident, city/state of	f charge:	
	and the relationship between the offense		automatic bar to employment. The date of the sition for which you are applying will be
Is there a	any name, other than the name stated ab	ove, which y	you have previously used to identify yourself:

VII. I HEREBY CERTIFY, THAT THE INFORMATION OF ACCURATE AND TRUE. I AM AWARE THAT ANY MISSION THIS APPLICATION WILL RESULT IN DISQUALIFY TERMINATION. I FURTHER UNDERSTAND ANY JOB OF IS PENDING FINAL APPROVAL BY THE SCHOOL BOARD	REPRESENTATION OR FALSIFICATION ING THE APPLICATION AND POSSIBLE FFER MADE BY THE ADMINISTRATION					
Have you ever been convicted of a felony?						
** This application will remain on file for 90 days.						
Applicant's Signature	Date					
AA/Equal Opportuni Equity Coordinator —						
DO NOT WRITE BEI	LOW THIS LINE					
VIII. INTERVIEWED BY	DATE					
Remarks						

Agreement

I hereby certify that the above information, to the best of my knowledge, is true, accurate and complete. Any misrepresentation or willful omissions of act shall be sufficient cause for disqualification of this application or termination of employment.

I authorize verification of any of this information. I grant my permission for those reviewing my application to contact all references and employers (past and present) whether or not listed on the application form. I authorize all current and former employers and references to release any information concerning my background. I authorize and hold harmless the Centerville Community School District and its employees to make all necessary and appropriate investigations to verify the information contained in the application form. I release any defamation claim I might have because a former employer or reference who disclosed facts and opinions regarding my prior work performance, character and fitness to work with and around children.

I understand that this application is not a contract of employment. I understand any job offer made by the administration is pending final approval by the school board of directors. I also understand that if hired, regardless of any oral representations to the contrary, the employment relationship is terminable-at-will as allowed by state and federal laws.

I authorize a criminal background investigation.	
_	Signature
_	
	Social Security #
Applications for this and similar positions will be accepted	d until .