

JOB APPLICATION
CHESTER COUNTY BOARD OF EDUCATION
P.O. BOX 327 – HENDERSON, TN 38340
TELEPHONE: 731.989.5134

To be filled out by the applicant. Answer all questions in your own handwriting. Please answer every question. If additional details will be of value in answering these questions use a separate sheet. All information will be held strictly confidential. Write "no" or "NA" (not applicable) after questions that do not apply to you.

1. Name _____
FIRST MIDDLE LAST SOCIAL SECURITY NO.

2. Address _____
NUMBER STREET CITY & STATE

3. Home Telephone Number _____ Alternate Telephone Number _____

4. Email address _____ Date of Birth _____ Are you a U.S. Citizen? _____

If not, what is your immigration status? _____

5. Position for which you are applying _____

6. _____
LIST ANY SKILLS OR EXPERIENCE, WHICH MIGHT BE HELPFUL FOR THIS POSITION

7. Write a statement concerning your present physical condition _____

8. If you have a disability, please explain or demonstrate how with or without reasonable accommodations you would perform job related functions of this position. _____

9. Are you a member of: National Guard: Yes ___ No ___ Reserves: Yes ___ No ___

10. EDUCATION:

NAME OF HIGH SCHOOL, CITY, STATE Graduate: Yes ___ No ___ GED ___
IF NO, HIGHEST YEAR COMPLETED _____

NAME OF COLLEGE, UNIVERSITY, CITY, STATE Graduate: Yes ___ No ___
IF NO, HIGHEST YEAR COMPLETED _____

BUSINESS COLLEGE, CITY, STATE Graduate: Yes ___ No ___
IF NO, HIGHEST YEAR COMPLETED _____

FOR OFFICE USE ONLY
Date Received _____
Date Application Expires _____

11. Past Employment. If additional space is required use REMARKS.

DATES		NAME & MAILING ADDRESS OF EMPLOYER TELEPHONE NUMBER	POSITION	IMMEDIATE SUPERVISOR	MONTHLY SALARY OR HR RATE
From:	To				

12. Have you ever been discharged or forced to resign from any position? _____

13. Are you presently employed? _____ If so, why do you wish to change jobs? _____

14. May we contact your present employer? _____

15. References: You must list three persons, other than past employers and relatives, who can provide information as to your ability and character.

Name	Address	Telephone Number

Name	Address	Telephone Number

Name	Address	Telephone Number

16. Remarks: _____

This application will be property of the Chester County Board of Education. It will be current for two (2) school years. After that time it will be destroyed.

It is the policy of the Chester County Board of Education to provide for equal employment opportunities to all individuals regardless of race, color, religion, sex, national origin, age or disability.

Signature _____ Date _____

The accuracy of information submitted on this application may be verified by fingerprint and criminal history records check conducted by the Tennessee Bureau of Investigation pursuant to Tenn. Code Ann. section 49-5-413. You are not required to disclose a parking or moving traffic violation if the maximum sanction provided by law for such violation does not include a period of confinement. You may be required to pay the costs incurred in conducting this background investigation if you are offered and accept a position with the school system. **“Knowingly falsifying information required by Sec. 49-5-406 (a) (1) shall be sufficient grounds for termination of employment and shall also constitute a Class A misdemeanor which must be reported to the District Attorney General for prosecution.”**