

# APPLICATION FOR EMPLOYMENT

**Canton Local School District**  
4526 Ridge Avenue S.E.  
Canton, Ohio 44707  
Phone 484-8010

Date \_\_\_\_\_

Soc. Security # \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Initial

Present Address \_\_\_\_\_  
Number Street City State Zip

How many years have you lived at this address? \_\_\_\_\_ Telephone No. \_\_\_\_\_

Job(s) applying for 1. \_\_\_\_\_  
2. \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

Do you want to work ( ) Full time or ( ) Part-time?

Have you worked for us before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

If hired, on what date will you be available to start work? \_\_\_\_\_

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work in this position?  
\_\_\_\_\_  
\_\_\_\_\_

What kind of job-related office equipment can you operate? \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony or traffic violation? ( )No ( )Yes

If yes, describe in full. \_\_\_\_\_  
\_\_\_\_\_

### Person to be notified in case of accident or emergency

Name \_\_\_\_\_ Home Phone Number \_\_\_\_\_  
Address \_\_\_\_\_ Work Phone Number \_\_\_\_\_

**NOTIFICATION:** No person shall on the basis of race, color, religion, sex, national origin, ancestry, age, creed, marital or veteran status, or the presence of a non-job related medical condition or handicap be denied employment by the Canton Local School District.

**AN EQUAL OPPORTUNITY EMPLOYER**

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME AND ADDRESS	YEARS ATTENDED	GRADUATED	COURSE OR MAJOR
High School			( )Yes ( )No	
College			( )Yes ( )No	
Business or Trade			( )Yes ( )No	
Other			( )Yes ( )No	

PRIOR WORK HISTORY (List in order, last or present employer first.)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				

PERSONAL REFERENCES

(Give below the names of persons not related to you, whom you have known at least one year.)

	NAME	ADDRESS	PHONE	BUSINESS	YEARS KNOWN
1					
2					
3					

**PLEASE READ CAREFULLY  
APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be considered sufficient cause for dismissal. All employees will be fingerprinted and the record reviewed before final approval for employment.

I authorize Canton Local Schools to verify all data given and to check with each reference unless I state otherwise on this application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Application will remain active for a period of two years from date submitted.

(FOR ADMINISTRATIVE USE ONLY)

INTERVIEW ( ) YES ( ) NO Date \_\_\_\_\_ Time \_\_\_\_\_

Result of Interview \_\_\_\_\_

Acceptable for employment? \_\_\_\_\_ Starting Rate \_\_\_\_\_ Starting Date \_\_\_\_\_ Shift \_\_\_\_\_  
Occupation \_\_\_\_\_ Dept. \_\_\_\_\_

Interviewed by: \_\_\_\_\_ Employed by: \_\_\_\_\_  
Date of Board Action: \_\_\_\_\_