

Montecito High School Assets Employment Application



Montecito High School
Assets Program
720 9th Street
Ramona, CA 92065
760-787-4302
760-789-0928

PERSONAL

NAME (Last)					(First)					(Middle)					DATE														
FOR CHECKING PRIOR RECORDS, PROVIDE OTHER NAMES UNDER WHICH YOU HAVE WORKED.										AREA CODE + TELEPHONE					BUSINESS MESSAGE PHONE														
PRESENT ADDRESS (NO. AND STREET)										(CITY)					(STATE)					(ZIP)					MAILING ADDRESS (P.O. BOX)				
POSITION APPLIED FOR (GIVE EXACT TITLE)										HAVE YOUR PREVIOUSLY APPLIED FOR A POSITION WITH THE DISTRICT?																			
										YES (Write "Yes" below)					NO (Write "No" below)														
ARE YOU RELATED TO ANY EMPLOYEES OF THIS DISTRICT? <i>PLEASE NOTE THAT THIS INFORMATION WILL IN NO WAY DISQUALIFIES YOU.</i>										CAN YOU AFTER EMPLOYMENT, SUBMIT PROOF OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES?																			
YES (Write "Yes" below)					NO (Write "No" below)					If yes, write relationship below					YES (Write "Yes" below)					NO (Write "No" below)									
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE WITHIN THE LAST SEVEN YEARS WHICH RESULTED IN YOUR BEING IMPRISONED, PLACED ON PROBATION, OR REQUIRED TO PAY A FINE? (CONVICTIONS ARE NOT AN AUTOMATIC BAR TO EMPLOYMENT. THE RECENCY AND RELEVANCY OF THE CONVICTION WILL BE CONSIDERED.)																													
BY SIGNING THIS APPLICATION YOU AGREE TO IMMEDIATELY NOTIFY THE RAMONA UNIFIED SCHOOL DISTRICT IF YOU SHOULD BE CONVICTED OF ANY CRIME WHILE YOUR JOB APPLICATION IS PENDING OR DURING YOUR PERIOD OF EMPLOYMENT, IF HIRED.																													
YES (Write "Yes" below)										NO (Write "No" below)																			

DRIVER'S LICENSE

NUMBER					STATE					EXP. DATE					CLASS				

EDUCATION

HIGH SCHOOL					CITY/STATE					HIGHEST GRADE COMPLETED (OR GED)					DID YOU GRADUATE?														
COLLEGE BUSINESS OR TRADE SCHOOL					CITY/STATE					ATTENDANCE DATES					DEGREE/YEAR					MAJOR SUBJECT					SEMESTER UNITS				
										FROM					TO														

EMPLOYMENT HISTORY

CURRENT/MOST RECENT EMPLOYER:		TYPE OF BUSINESS:			
ADDRESS:			PHONE:		
STARTING TITLE:		ENDING TITLE:	STARTING SALARY:		FINAL SALARY:
DATES EMPLOYED:	FROM: Write date below	TO: Write date below	MAY WE CONTACT NOW?	YES (Write "Yes" below)	NO (Write "No" below)
NAME OF SUPERVISOR:			REASON FOR LEAVING:		
BRIEF SUMMARY OF DUTIES:					
PREVIOUS EMPLOYER:		TYPE OF BUSINESS:			
ADDRESS:			PHONE:		
STARTING TITLE:		ENDING TITLE:	STARTING SALARY:		FINAL SALARY:
DATES EMPLOYED:	FROM: Write date below	TO: Write date below	MAY WE CONTACT NOW?	YES (Write "Yes" below)	NO (Write "No" below)
NAME OF SUPERVISOR			REASON FOR LEAVING:		
BRIEF SUMMARY OF DUTIES:					

RELEVANT EXPERIENCE (LIST)

SUBJECT(S) TAUGHT/ ACTIVITY LEAD:	LENGTH OF ASSIGNMENT(S):	AGE LEVEL(S):

PERSONAL & PROFESSIONAL REFERENCES

NAME:	ADDRESS:	PHONE:	EMAIL: