

Cove School District #15

**P.O. Box 68
Cove, OR 97824**

Employment Application

“We are equal an Equal Opportunity/Affirmative Action employer. We are dedicated to a policy of non-discrimination in employment on the basis of race, color, religion, sex, national origin, age mental health or physical disability.”

(Print or use type) If additional space is needed use bottom half of page three.
Please fill out only that portion of this form that you feel pertinent to the position for which you are applying.

1. Position applying for _____ Date: _____

2. Name _____
Last First Middle

3. Mailing Address: _____
Street City

State Zip

4. Education Record- if now in school, include present term

Name and location of High School Date Left Y__ N__
Graduated?

If not in High School, do you have a certificate of equivalency (GED)? Y__N__
If yes, Date: _____

Schools Attended after High School

Or special training received

Name and Location	From	To	Full Time/ Part time	Field of Study	No. of credits rcvd	Certificate or degree rcvd

5. List any special training, licenses, certificates, machine skills, office equipment, languages, or other special skills you may have that are pertinent to the position to which you are applying.

Military Experience

1. Are you a “Veteran” as defined under Oregon Law (ORS 408.225)?
Please Circle One

Yes No

2. Are you a “Disabled Veteran” as defined under Oregon Law (ORS 408.225)?
Please Circle One

Yes No

A veteran will need to submit the following:

1. Copy of the Certificate of Release or Discharge from Active Duty (DD Form 214 or 215.)

OR

Proof of receiving a non-service connected pension from the US Dept. of Veteran's Affairs.

2. Disabled veterans must also submit a copy of their Veterans disability preference letter.

6. **References:** List the names of three persons other than former employers and relatives having knowledge of your character, experience, or abilities.

Name	Address	Business	Phone number
1.			
2.			
3.			

7. **Employment History:** Beginning with your present or most recent job, describe your work experience during the past **TEN** years. In addition, list any other prior experience related to the duties of the position for which you are applying. **Also include all non-paid or volunteer work.**

Present Employer:

Company Name	Address	Phone Number
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Your Job Title	Supervisors Name and Title	Employed from/to
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Please list your specific duties:

If you still work here, may we contact this employer? yes no

Company Name	Address	Phone Number
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Your Job Title	Supervisors Name and Title	Employed from/to
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Please list your specific duties:

Company Name	Address	Phone Number
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Your Job Title	Supervisors Name and Title	Employed from/to
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Please list your specific duties:

Company Name	Address	Phone Number
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Your Job Title	Supervisors Name and Title	Employed from/to
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Please list your specific duties:

Company Name	Address	Phone Number
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Your Job Title	Supervisors Name and Title	Employed from/to
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Please list your specific duties:

Applicant accepted Yes No Date of appointment: _____

Applicant rejected Yes No Check reasons for rejection below

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Education | <input type="checkbox"/> Work History |
| <input type="checkbox"/> Experience | <input type="checkbox"/> Incomplete Application |
| <input type="checkbox"/> Test Scores | <input type="checkbox"/> Interview |
| <input type="checkbox"/> Licenses | <input type="checkbox"/> Qualified for some jobs, but no vacancies at time of application |
| <input type="checkbox"/> Certificates | <input type="checkbox"/> References |
| <input type="checkbox"/> Physical | |
| <input type="checkbox"/> Other | |