



240 Arona Road, New Stanton, PA 15672 Phone: 724-925-3532 Fax: 724-925-1423

GENERAL EMPLOYMENT APPLICATION

PERSONAL	LAST		FIRST		MIDDLE		
	STREET ADDRESS					SOCIAL SECURITY NUMBER ¹	
	CITY			STATE			ZIP
	PRIMARY PHONE NUMBER			SECONDARY PHONE NUMBER			
	EMAIL ADDRESS					DATE	Enter date.
	POSITION(S) DESIRED—LIST IN ORDER OF PREFERENCE						
	1.		2.		3.		
	LIST OTHER SCHOOLS FOR WHICH YOU HAVE WORKED						
	ARE YOU AVAILABLE TO WORK		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME		ARE YOU INTERESTED IN BEING PLACED ON OUR SUBSTITUTE LIST?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	DATE AVAILABLE FOR EMPLOYMENT	Enter date.		AVAILABLE FOR SHORT-TERM SUB?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO	

CERTIFICATION	LIST ALL AREAS IN WHICH YOU HOLD A VALID PA AND/OR OUT-OF-STATE CERTIFICATE(S)/DEGREE(S). (NOTE: APPLICANTS HOLDING A CERTIFICATE FROM ANOTHER STATE MUST OBTAIN A PENNSYLVANIA CERTIFICATE OF LIKE AND KIND.)		
	AREA OF CERTIFICATION/DEGREE	ISSUING STATE	DATE ISSUED
			Enter date.
			Enter date.
			Enter date.
			Enter date.
			Enter date.
			Enter date.

EDUCATION	SCHOOL AND LOCATION	COURSE OF STUDY	DIPLOMAS, DEGREES OR CREDITS EARNED	GRADE POINT AVERAGE	DID YOU GRADUATE?
	HIGH SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO
	VOCATIONAL/ TECHNICAL SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO
	COLLEGE/UNIVERSITY				<input type="checkbox"/> YES <input type="checkbox"/> NO
	COLLEGE/UNIVERSITY				<input type="checkbox"/> YES <input type="checkbox"/> NO
	GRADUATE STUDY				<input type="checkbox"/> YES <input type="checkbox"/> NO



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LIST PRESENT OR MOST RECENT EMPLOYMENT FIRST

EXPERIENCE	1	DATES		NAME AND ADDRESS OF EMPLOYER		POSITION HELD/TITLE				
		FROM	Enter date.							
		TO	Enter date.							
		PHONE NUMBER				SUPERVISOR'S NAME AND TITLE				
		WORK PERFORMED								
		REASON FOR LEAVING						FINAL WAGE		<input type="checkbox"/> HOURLY or <input type="checkbox"/> ANNUALLY
	2	DATES		NAME AND ADDRESS OF EMPLOYER		POSITION HELD/TITLE				
		FROM	Enter date.							
		TO	Enter date.							
		PHONE NUMBER				SUPERVISOR'S NAME AND TITLE				
		WORK PERFORMED								
		REASON FOR LEAVING						FINAL WAGE		<input type="checkbox"/> HOURLY or <input type="checkbox"/> ANNUALLY
	3	DATES		NAME AND ADDRESS OF EMPLOYER		POSITION HELD/TITLE				
		FROM	Enter date.							
		TO	Enter date.							
		PHONE NUMBER				SUPERVISOR'S NAME AND TITLE				
		WORK PERFORMED								
		REASON FOR LEAVING						FINAL WAGE		<input type="checkbox"/> HOURLY or <input type="checkbox"/> ANNUALLY
	4	DATES		NAME AND ADDRESS OF EMPLOYER		POSITION HELD/TITLE				
		FROM	Enter date.							
		TO	Enter date.							
		PHONE NUMBER				SUPERVISOR'S NAME AND TITLE				
		WORK PERFORMED								
		REASON FOR LEAVING						FINAL WAGE		<input type="checkbox"/> HOURLY or <input type="checkbox"/> ANNUALLY
WE MAY CONTACT THE EMPLOYERS LISTED ABOVE UNLESS YOU INDICATE THOSE YOU DO NOT WANT US TO CONTACT.					DO NOT CONTACT					
					EMPLOYER NUMBER(S)					
					REASON					



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Skills	PLEASE LIST ANY SKILLS AND/OR ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL IN CONSIDERING YOUR APPLICATION WHICH ARE NOT DESCRIBED ABOVE (SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCES INCLUDING U.S. MILITARY SERVICE, HONORS, ACTIVITIES, AWARDS, TECHNICAL SKILLS OR PROFESSIONAL DEVELOPMENT:

REFERENCES	REFERENCES SHOULD INCLUDE INDIVIDUALS WHO HAVE FIRST-HAND KNOWLEDGE OF YOUR COMPETENCE AND QUALIFICATIONS. DO NOT INCLUDE RELATIVES.			
	NAME	POSITION	ADDRESS	TELEPHONE

GENERAL BACKGROUND INFORMATION

You must give complete answers to all questions. If you answer "Yes" to any question, you must list all offenses, and for each conviction provide the date of conviction and disposition, regardless of the date or location of occurrence. Conviction of a criminal offense is *not* a bar to employment in all cases. Each case is considered on its merits. Your answers will be verified with appropriate police records.

Criminal Offense includes felonies, misdemeanors, summary offenses and convictions resulting from a plea of "nolo contendere" (no contest).

Conviction is an adjudication of guilt and includes determinations before a court, a district justice or a magistrate, which results in a fine, sentence or probation.

You may omit: minor traffic violations, offenses committed before your 18th birthday which were adjudicated in a juvenile court or under a Youth Offender Law, and any convictions which have been expunged by a court or for which you successfully completed an Accelerated Rehabilitative Disposition (ARD) program.

Have you ever been convicted of a criminal offense?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you currently under charges for a criminal offense?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you ever forfeited bond or collateral in connection with a criminal offense?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Within the last ten years, have you been fired from any job for any reason?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Within the last ten years, have you quit a job after being notified that you would be fired?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you subject to any visa or immigration status, which would prevent lawful employment?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Note: If you answered "Yes" to any of the above questions, please provide a detailed explanation including dates.	



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UPON HIRE, EMPLOYEES WILL BE REQUIRED TO SUBMIT:

Act 34 Clearance: PA State Police Criminal Background Check from the Pennsylvania State Police; only ORIGINAL reports not more than one (1) year old accepted

Act 114: Federal Criminal History Record from the Federal Bureau of Investigation (FBI); only ORIGINAL reports not more than one (1) year old accepted

Act 151: Pennsylvania Child Abuse History Clearance from the Pennsylvania Department of Public Welfare; only ORIGINAL reports not more than one (1) year old accepted

CERTIFICATION AND RELEASE AUTHORIZATION

I certify that all of the statements made on this application are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any misrepresentation of information shall be sufficient cause for (1) rejecting my candidacy, (2) withdrawing of any offer of employment, or (3) terminating my employment.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and to respond fully and completely to all questions that officials of Central Westmoreland Career and Technology Center may ask regarding my prior work history and performance unless listed under the "Do Not Contact" Section on Page 2 of this application. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to Central Westmoreland Career and Technology Center. I further authorize school officials to investigate my background, now or in the future, to verify the information provided, and I release from liability all persons and/or entities supplying information regarding my background. However, I do not authorize the production of medical records or other information which would tend to identify a disability nor do I authorize inquiries which would include information related to any medical condition or medical history. Further, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by Central Westmoreland Career and Technology Center or by entities or persons providing such information to the school, including any and all claims concerning allegations of employment discrimination because of race, color, sex, religion, national origin, ancestry, age, or disability.²

Signature of Applicant <i>(in ink)</i>		Date	Enter date.
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¹Federal Privacy Act [5 U.S.C. §552A NOTE] Statement. Authority for requesting social security account numbers: Public School Code of 1949 [24 P.S. §12-1212, 24 P.S. §1224] Principal Purpose: To verify certification. Other Purposes: Identification and collection of criminal/disciplinary records for certified educators. Disclosure: Mandatory. Failure to provide the Social Security Number will result in an applicant not being considered for employment. PDE 353A (7/10/08)

²Pennsylvania school districts shall not discriminate in their educational programs, activities or employment practices based on race, color, national origin, sex, disability, age, religion, ancestry, or any other legally protected classification. This policy is in accordance with state and federal laws, including Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and the Pennsylvania Human Relations Act. Information relative to special accommodation, grievance procedure, and the designated responsible official for compliance with Title VI, Title IX, and Section 504 may be obtained by contacting the school district.



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Essay	<p>We are interested in your ability to organize and express thoughts on a specific topic in a succinct manner. Please select one of the following topics and write an essay in the space provided on this page.</p> <ol style="list-style-type: none"> 1. The Most Important Qualities of an Outstanding Employee 2. My Philosophy of Worker and Employer Relationship 3. Essential Elements of Quality of Workmanship 4. How Information Technology (i.e., computers, Internet) Can Be Integrated into the Daily Routine (of the job for which you are applying) 		
	<p>I certify that I am the sole author of the above essay.</p>		
	<p>Signature of Applicant <i>(in ink)</i></p>		<p>Date Enter date.</p>