pine Mountain Middle School

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| --- |
| **Today’s Date:** |

|  |  |
| --- | --- |
| **POSITION APPLIED FOR** |  |

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| --- |
| **GENERAL INFORMATION** |
|  Name (last, first, middle initial)                                                       Student ID (optional) |
|  Street Address                                                                                                                                                                       City, State, Zip |
|  Home Phone No.                                                                                                  Phone No. |
|  |
| **TRAINING AND EDUCATION** |
| Circle highest grade completed:           7 8                  9                  10             11               12             GED |
|  Colleges/other training |  Major/subject |  Degree/certificates |
|   |   |   |
|   |   |   |
| **ADDITIONAL SKILLS  Describe skills relevant to the job for which you are applying** |
| **SKILL** | **TYPE OF EXPERIENCE** | **LEVEL OF EXPERTISE** |
| Office equipment, computers, software (typing speed, programs, etc.) |   |   |
| Technical skills, professional licenses |   |   |
| Advanced Training |   |   |
| Other |   |   |
| Can you perform the essential functions of the job with or without reasonable accommodation?      Yes                No    |
| **BACKGROUND INFORMATION** |
| each case is considered separately based on job duties and performance areas |
| Do you have a valid Georgia State Driver's License?                   Yes              No                 Other State \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If position applied for involves transportation, do you have reliable transportation?   Yes              No           Please explain:  |
| Have you received any citations or behavior infractions this year?    Yes             NoIf yes, please explain on a separate sheet of paper:   |
| **How/where did you hear about the position for which you are applying?  (Check one)** |
|  \_\_\_\_\_\_ Friend or relative |  | \_\_\_\_\_\_ Internet |
| \_\_\_\_\_\_ Newspaper ad Which?\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| \_\_\_\_\_\_ Other please specify  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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|   | **EMPLOYMENT HISTORY** |
|   | Beginning with your present or most recent employment, list your employment history.  Include self-employment, military service, volunteer experience and periods of unemployment.  The following sections MUST be completed even if a resume is submitted. |
|   | Employer | Employed from: | To: |
|   | Address: | Supervisor |
|   | Phone | Hours worked/week | Starting Hourly Rate |
|   | Position | Last Hourly Rate |
|   | Primary duties  |
|   | May we contact this employer | Supervisor's phone |  |
|   |  |
|   | Personal References |  |  |
|   | Name | Street Address: |
|   | City: | State: | Zip: |
|   | Telephone: | e-mail: |
|   | How do you know this person? |
|   | How long have you known this person? |  |  |
|   | Is this person a relative of yours? |
|   | Personal References |  |  |
|   | Name: | Street Address: |
|  | City: | State | Zip |
|   | Telephone: | e-mail: |
|   | How do you know this person? |
|   | How long have you known this person? |  |  |
|   | Is this person a relative of yours? |
| **PROFESSIONAL REFERENCES** | **Please list below any people in addition to supervisors listed above who can responsibly evaluate your work performance** |   |
|   | Name | Place of employment & title | Phone |
|   |   |   |   |
|   |   |   |   |
|   |   |   |   |
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It is understood and agreed that the foregoing is true to the best of my knowledge, and that my falsification of this application will be grounds for elimination from further consideration or for dismissal. I authorize PMMS to solicit information regarding my character, general reputation, credit, previous employment, and similar background information, and to contact any and all references I have given on my application.  I release all parties and persons connected with any such request for information from all claims, liabilities, and damages that may arise out of the furnishing of such information.  If employed, I release PMMS from any liability for future references it may provide regarding my work history at the firm.

I understand that employment with the Employer is “at-will”, which means that either PMMS or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute.  All employment is continued on that basis.  I understand that no supervisor, manager or executive of the Employer, other than the General Manager has any authority to alter the foregoing.

*Applicant's signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*