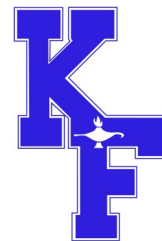


Kehoe-France Northshore

25 Patricia Drive
Covington, LA 70433
(985) 892-4415



APPLICATION FOR EMPLOYMENT

We consider application for employment for all positions without regard to race, religion, sex, national origin, age, marital or veteran status, handicap, or any other legally protected status.

PLEASE PRINT

Position Applying for _____ Date of Application _____

Last Name _____ First Name _____ Middle Name _____

Address _____ City _____ State _____ Zip _____

Cell _____ Date of Birth _____ Social Security Number _____

Email: _____

Marital Status: _____ Spouse: _____

If employed and you are under 18, can you furnish a work permit? Yes___ No___

Have you ever been employed here before? Yes___ No___ If yes, give date _____

Are you employed now? Yes___ No___

If yes, where? _____

May we contact your present employer? Yes___ No___

On what date would you be available for work? _____

Are you available to work: Full-Time___ Part-Time___

Salary Desired _____

Are you in good health and free of communicable disease? _____

Have you ever been convicted of, admitted to, or been the subject of substantial evidence of an act of battery, child abuse, or child molesting?

If yes, please explain _____

This school is committed to safeguarding and promoting the welfare of children and expects all staff and volunteers to share this commitment. All staff are subject to appropriate vetting procedures and satisfactory Criminal Background Checks (or equivalent) covering the previous 10 years, as well as random drug screenings.

Education

	ELEMENTARY SCHOOL	HIGH SCHOOL	COLLEGE	GRADUATE/PROFESSIONAL
School Name				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe course study				
Describe specialized training, apprenticeship skills and extracurricular activities				
Honors received				
State any additional information you feel may be helpful to us in considering your application				

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1.

Employer	Dates Employed	
Address	From	To
Telephone Number		
Home	Cell	Hourly Rate/Salary
Job Title	Supervisor	Starting Final
Reason for leaving		

2.

Employer	Dates Employed	
Address	From	To
Telephone Number		
Home	Cell	Hourly Rate/Salary
Job Title	Supervisor	Starting Final
Reason for leaving		

3.

Employer	Dates Employed	
Address	From	To
Telephone Number		
Home	Cell	Hourly Rate/Salary
Job Title	Supervisor	Starting Final
Reason for leaving		

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience

Professional References

Give name, address, phone number, and email of three professional references, one of whom is/was a direct supervisor:

Name _____

Address _____ Phone (____) _____

Email _____

Name _____

Address _____ Phone (____) _____

Email _____

Name _____

Address _____ Phone (____) _____

Email _____

Person to be notified in case of emergency

Name _____ Phone _____

Address _____ Relationship _____

Applicant's Statement

I certify that the answers given here are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment, as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand, that I am required to abide by all rules and regulations of Employer.

Signature of Applicant: _____ Date: _____