

194 N. Limestone Street, Lexington, Kentucky 40507 Telephone (859) 254-1361 <u>www.sayreschool.org</u> Facsimile (859) 231-0508

# **APPLICATION FOR EMPLOYMENT**

Sayre School (the "School") actively seeks qualified individuals with diverse backgrounds and talents who will make a positive contribution to school life. The School is committed to providing equal opportunity to all employees and applicants without regard to age, race, color, national origin, sex (including pregnancy, childbirth, or related medical conditions), sexual orientation, citizenship status, uniform service member status, genetic information, religion, handicap or disability, if the individual is a smoker or non-smoker as long as the individual complies with workplace smoking policies, or any other protected status in accordance with all federal, state, or local law.

**General Instructions:** Please PRINT clearly. Each inquiry on this application must be <u>fully</u> <u>answered</u> or <u>completed</u>. If an inquiry does not apply, respond by using "N/A." If more space is needed for your response, please attach additional sheets of paper.

#### PERSONAL DATA

| Last Name First Name                                                | me Middle Name                 |  |  |  |
|---------------------------------------------------------------------|--------------------------------|--|--|--|
|                                                                     |                                |  |  |  |
| Present Address                                                     | How long have you lived there: |  |  |  |
| Street and Number                                                   | Years Months                   |  |  |  |
| City, State, Zip<br>Previous Address                                |                                |  |  |  |
| Street and Number                                                   | How long have you lived there: |  |  |  |
| City, State, Zip                                                    | Years Months                   |  |  |  |
| Telephone Number(s)                                                 | E-Mail Address                 |  |  |  |
|                                                                     |                                |  |  |  |
| Are you 18 years of age or older:                                   | Who were you referred by?      |  |  |  |
| □ Yes □ No                                                          |                                |  |  |  |
| Desides Design                                                      |                                |  |  |  |
| Position Desired:                                                   | /subiects):                    |  |  |  |
| Teacher Assistant     Grade Level                                   | Other (specify):               |  |  |  |
| Substitute Teacher     Subjects                                     |                                |  |  |  |
|                                                                     |                                |  |  |  |
| Placement Desired:   Full-Time  Part-Time                           |                                |  |  |  |
|                                                                     |                                |  |  |  |
| When are you available for work?                                    |                                |  |  |  |
|                                                                     |                                |  |  |  |
| Have you ever worked for the School before? [] Yes [] No            |                                |  |  |  |
| If Yes, please give dates and position(s):                          |                                |  |  |  |
|                                                                     |                                |  |  |  |
| Have you ever applied for a position with the School before? [] Yes |                                |  |  |  |
| If Yes, please give date(s) on which you applied and position(s):   |                                |  |  |  |
|                                                                     |                                |  |  |  |

#### PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Include part-time and seasonal employment. DO NOT ANSWER "SEE RESUME." Fill out this form completely.

| Employer 1          | Dates Employed |           | Work Performed |
|---------------------|----------------|-----------|----------------|
|                     | From (M/Yr)    | To (M/Yr) |                |
|                     |                |           |                |
| Telephone Number(s) |                |           |                |
| Address             |                |           |                |

|                     |                            | Hourly Rate/Salary     |                      |                |
|---------------------|----------------------------|------------------------|----------------------|----------------|
|                     | Queantiaan                 | Starting               | Final                |                |
| Job Title           | Supervisor<br>Name & Title | 5                      |                      |                |
|                     |                            |                        |                      |                |
| Reason for Leaving  |                            |                        |                      |                |
|                     |                            |                        |                      |                |
|                     |                            |                        |                      |                |
| Employer 2          |                            | Dates E                | mployed              | Work Performed |
|                     |                            | From (M/Yr)            | To (M/Yr)            |                |
|                     |                            |                        |                      |                |
| Telephone Number(s) |                            |                        |                      |                |
| Address             |                            |                        |                      |                |
|                     |                            | Hourly Ra              | ate/Salary           |                |
|                     | -                          | Starting               | Final                |                |
| Job Title           | Supervisor<br>Name & Title | Otarting               | 1 mai                | -              |
|                     | Name & The                 |                        |                      |                |
| Reason for Leaving  |                            |                        |                      |                |
|                     |                            |                        |                      |                |
|                     |                            |                        |                      |                |
| Employer 3          |                            | Dates E<br>From (M/Yr) | mployed<br>To (M/Yr) | Work Performed |
|                     |                            |                        |                      |                |
|                     |                            |                        |                      |                |
| Telephone Number(s) |                            |                        |                      |                |
| Address             |                            |                        |                      |                |
|                     |                            | Hourly Ra              | ate/Salary           |                |
| Job Title           | Currentieer                | Starting               | Final                |                |
| JOD TITLE           | Supervisor<br>Name & Title |                        |                      |                |
|                     |                            |                        |                      |                |
| Reason for Leaving  |                            |                        |                      |                |
|                     |                            |                        |                      |                |
|                     |                            |                        |                      |                |
| Employer 4          |                            | Dates E                | mployed              | Work Performed |
|                     |                            | From (M/Yr)            | To (M/Yr)            |                |
|                     |                            |                        |                      |                |
| Telephone Number(s) |                            |                        |                      |                |
| Address             |                            |                        |                      |                |
|                     |                            | Hourly Ra              | ate/Salary           |                |
|                     |                            | Starting               | Final                |                |
| Job Title           | Supervisor<br>Name & Title |                        |                      | 4              |
|                     |                            |                        |                      |                |
| Reason for Leaving  | 1                          |                        |                      |                |
| Ŭ                   |                            |                        |                      |                |
|                     |                            |                        |                      |                |
|                     |                            | 1                      |                      |                |

## EDUCATION

| School Name/Location    | Years<br>Completed<br>(Circle) | Diploma/Degree | Describe Course<br>of<br>Study or Major | Describe Specialized Experience,<br>Training, Skills, and Extra-Curricular<br>Activities |
|-------------------------|--------------------------------|----------------|-----------------------------------------|------------------------------------------------------------------------------------------|
| High School             | 9 10 11 12                     |                |                                         |                                                                                          |
| College/University      | 1 2 3 4                        |                |                                         |                                                                                          |
| Graduate/Professional   | 1 2 3 4                        |                |                                         |                                                                                          |
| Trade or Correspondence |                                |                |                                         |                                                                                          |

| Other |  |  |
|-------|--|--|
|       |  |  |

List any professional designations, certifications, licenses, or courses that may be applicable to the position for which you are applying:

| For Teacher Applicants:                                                                        | For Administrator Applicants:                                                                                                     |
|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|
| List extracurricular activities or coaching assignments you would be willing to accept:        | If applying for an administrator<br>position, please attach a<br>statement of your educational<br>philosophy to this application. |
| List experiences you have had which are related to teaching:                                   |                                                                                                                                   |
| Certification (if applicable):                                                                 |                                                                                                                                   |
| State:                                                                                         |                                                                                                                                   |
| Туре:                                                                                          |                                                                                                                                   |
| Number:                                                                                        |                                                                                                                                   |
| <b>Optional.</b> Please attach a statement of your educational philosophy to this application. |                                                                                                                                   |
|                                                                                                |                                                                                                                                   |
|                                                                                                |                                                                                                                                   |

#### REFERENCES

Please list no fewer than three references capable of judging your ability to perform the kind of work for which you have applied. At least two references must be professional.

| Name | School/Company | Address<br>(Street, City and State) | Telephone<br>Number | Number of<br>Years Known |
|------|----------------|-------------------------------------|---------------------|--------------------------|
|      |                |                                     |                     |                          |
|      |                |                                     |                     |                          |
|      |                |                                     |                     |                          |
|      |                |                                     |                     |                          |

#### BACKGROUND INFORMATION

Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment:

List any other names which you may have used and which will be necessary to verify prior to your employment:

If hired, can you provide proof that you are legally entitled to work in the U.S.?

If not, what steps must be taken for you to begin employment lawfully?

Have you ever been terminated, asked to resign from any job, or not been offered a contract to return for another year? 
Yes No If yes, please explain circumstances:

| If no, please explain:                                                                                                                                                                                                                                                                                                                                               |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Do you have any friends or relatives working at the School?<br>If yes, Name(s) and Relationship:                                                                                                                                                                                                                                                                     |
| Do you have adequate transportation to and from work? $\Box$ Yes $\Box$ No                                                                                                                                                                                                                                                                                           |
| Have you ever pled guilty, or no contest to, or been convicted of a felony?  Yes No If Yes, please give the date(s) and details:                                                                                                                                                                                                                                     |
| Have you ever pled guilty, or no contest to, or been convicted of a misdemeanor resulting in imprisonment within the last seven years?<br>□ Yes □ No<br>If Yes, please give the date(s) and details:                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                      |
| Have you been arrested for any matters for which you are out on bail or on your own recognizance pending trial?  Yes No If Yes, please give the date(s) and details:                                                                                                                                                                                                 |
| NOTE: Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. (Do not include minor traffic citations and arrests or convictions which have been sealed or expunged in answering this question.) |
| Do you have any commitments to any other employer which may affect your employment?  Yes  No                                                                                                                                                                                                                                                                         |
| If yes, explain:                                                                                                                                                                                                                                                                                                                                                     |

## OTHER INFORMATION

Please describe any other experience that you have which would be relevant to the job for which you are applying:

# STATE LAW AUTHORIZES THIS SCHOOL TO REQUIRE A CRIMINAL HISTORY BACKGROUND CHECK AS A CONDITION OF EMPLOYMENT FOR THIS TYPE OF POSITION