

**DILLARD ACADEMY
CLASSIFIED PERSONNEL
APPLICATION FOR EMPLOYMENT**

Birth Date: _____ DATE: _____

- I. POSITION DESIRED**
- | | |
|---|--|
| <input type="checkbox"/> Bus Monitor
<input type="checkbox"/> School Bus Driver
<input type="checkbox"/> Clerical
<input type="checkbox"/> Custodian | Full-time _____ Part-time _____
<input type="checkbox"/> Counselor/Teacher Assistant
<input type="checkbox"/> Coach (indicate sport) _____
<input type="checkbox"/> Other _____ |
|---|--|

II. PERSONAL DATA Telephone No. _____

Name: _____ / / _____
 Last First M Social Security Number

Address: _____
 Street City ST Zip

(Selective Service Registration)[In compliance with N.C. General Statute 143 B-42.1] Are you required to be registered with the Selective Service System? yes no

III. EDUCATION

Name	Address	Dates attended	Graduated Y/N	Diploma/Degree
High School				
College				

Did you graduate from high school or pass the high school equivalency test (GED)? yes no
 Scholastic Aptitude Test Score _____ T.A.B.E. Score _____ Typing WPM _____ Shorthand _____

IV. EMPLOYMENT RECORD (answer questions for each period of employment. References will be contacted)

A. Title of present or last position _____

Duties _____

Date Employed _____ Starting Salary _____ Ending _____ Date Separated _____

Name and Title of Supervisor: _____

Employer Name and Address: _____

Full-Time Years _____ Months _____ Part-Time Years _____ Months _____

Reason for leaving _____

B. Title of next to last position: _____

Duties _____

Date Employed _____ Starting Salary _____ Ending _____ Date Separated _____

Name and Title of Supervisor: _____

Employer Name and Address: _____

Full-Time Years _____ Months _____ Part-Time Years _____ Months _____

Reason for leaving _____

V. **ADDITIONAL REFERENCES: (Whom We May contact)**

Name	Position	Address (include Zip Code)	Telephone No.

VI. **ADULT BUS DRIVER INFORMATION:** (complete only if applying for Bus Driver position)

North Carolina Bus Drivers License: Yes ___ No ___ Bus Drivers' License No. _____

Have you ever been convicted of a traffic violation? Yes ___ No ___ If yes, when and what was the violation:

VII. **SPECIAL TALENTS AND INTERESTS:** (Include information which will support your application for employment – skills, training, license, business machines, etc.)

Have you been convicted of any offense involving sexual molestation, physical or sexual abuse or rape of a child?

Yes ___ No ___ If yes please explain: _____

My signature below authorizes Dillard Academy to conduct a background investigation and authorizes release of information connected with my application for employment. This investigation may include such information as criminal or civil conviction, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right to access to any such information and without limitation hereby release Dillard Academy and the references source from any liability in connection with its release or use.

This release includes the sources cited above and specific examples as follows: Local Law Enforcement Agencies, Department of Motor Vehicles, Information from the North Carolina Criminal Information Center and the Division of Criminal Information either data on all criminal convictions or certification that no data or criminal convictions are maintained, information from The Department of Social Services Child Protective Services Unit pertaining in any findings of child abuse or neglect investigation involving me.

Furthermore, I certify that the information given by me in this application is true and complete. I understand that any misrepresentation, falsification, or omission will be sufficient cause for cancellation of the application, or dismissal from employment if I have been hired. Also, it is understood that this application and all other pre-employment data become the property of Dillard Academy.

Signature

Date

**PRE-EMPLOYMENT
ALCOHOL AND OTHER DRUG TESTING CONSENT**

I _____ understand that as required by the Federal Motor Carrier Safety Regulations, Title 49 code of Federal Regulation, Part 40, all applicants for positions for which a commercial Driver's License is required must be tested for alcohol and other drugs as a pre-condition for employment.

I consent to the urine and breath sample collection and testing for these controlled substances as required.

I understand that a positive test result for those controlled substance will render me unqualified to be hired for a position to operate a commercial motor vehicle. The results will not be disclosed without my written authorization or a court order.

Signature

Date

