

### APPLICATION FOR EMPLOYMENT

The Mission of St. Paul's Episcopal School is to grow children spiritually, intellectually, socially, and physically by equipping them with the Gospel, a love of learning, a creative mind, and a giving spirit.

Directions: Please complete this application form and return it to the address at the end of the form along with

- 1. A current resume;
- 2. Transcripts of college credits showing degrees earned; and
- 3. A copy of teaching certificates held (if applicable).

Applicant Name		Date	
	Email Address		
Current Address			
City	_ Zip	How long have you lived there?	
Previous Address			
City, State	Zip	How long did you live there?	
EMPLOYMENT INTEREST	'S		
Position(s) Desired		Date available:	
Type of work desired: □ Full Time □	Part Time In	terested in working in the Aftercare Program: ☐ Yes ☐ No	
Type of work desired. — Fall Time —			
• •		How were you referred to St. Paul's?	
Do you attend St. Paul's Episcopal Cl	nurch? 🗆 Yes 🖵 No	How were you referred to St. Paul's?	
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Employer 2  Telephone Number(s)  Address		Work Performed	
Job Title	Dates Employed From (M/Yr)	Reason For Leaving	
Supervisor Name, Title, & Phone Number	To (M/Yr)		
Employer 3		Work Performed	
Telephone Number(s)			
Address			
Job Title	Dates Employed From (M/Yr)	Reason For Leaving	
Supervisor Name, Title, & Phone Number	To (M/Yr)		
-		Tw. In C. I	
Employer 4		Work Performed	
Telephone Number(s)			
Address			
Job Title	Dates Employed From (M/Yr)	Reason For Leaving	
Supervisor Name, Title, & Phone Number To (M/Yr)			

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# **BACKGROUND INFORMATION**

Please explain fully any gaps in your employment history. <u>Be sure to account for all periods of ti</u> military service and any period of unemployment.	G
Maiden Name (if applicable) and/or other name(s) under which you have been previously emploschool.	•
If hired, can you provide proof of identity and legal authorization to work in the U.S.?	☐ Yes ☐ N
If not, what steps must be taken for you to begin employment lawfully?	
Have you ever been terminated or asked to resign? If yes, please explain.	☐ Yes ☐ N
May we contact your current employer?  If no, please explain:	☐ Yes ☐ N
Do you have any friends or relatives working here?  If yes, Name(s) and Relationship:	☐ Yes ☐ No
Have you ever plead guilty, or no contest to, or been convicted of any misdemeanor or felony, e	
traffic citations?  If yes, please give the date(s) and details:	☐ Yes ☐ N
Are you currently out on bail or on your own recognizance pending trial for any crime, felony o	or misdemeanor?
If yes, please give the date(s) and details:	
Do you have any commitments to any other employer which may affect your employment?  If yes, explain:	□ Yes □ N

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# **EDUCATION & TRAINING**

High School	(please circle)	Major	Degree/Diploma
	9 10 11 12	,	
College/University			
	1 2 3 4		
College/University	1 2 3 4		
Graduate/Professional	1 2 3 4		
Trade or Correspondence	1 2 3 4		
hich you are applying and the da	ites they were obtaine	d: 	
re you taking any educational or	•	•	☐ Yes ☐ No
yes, what courses and where?			
n the snace helow inrovide any a		ou feel will assist us in evaluating	your qualifications for
mployment, including community	y affiliations, members	hips, or special skills.	

#### **REFERENCES**

List three individuals who are qualified to evaluate your capabilities. Do not include relatives or family members.

Name	Address	Phone	Occupation/Position	Relation to You
1				
2				
3				

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#### APPLICANT'S STATEMENT

I certify that answers given in this application are true and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision.

In the event I am offered employment, I understand that any false or misleading information I knowingly provided in my application or interview(s) may result in discharge and/or legal action. I understand that a background check will be performed and that employment is conditional upon a favorable background check.

I understand that should I be offered employment, a condition will be providing copies of information such as social security card, driver's license, birth certificate, etc.

I understand that the School reserves the right, to the extent permitted by law, to require drug and alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the School or its designee. I release the School and its designee from any and all liability and damages which may result or arise from any drug test or the provision of information in connection with such a test.

I understand also that if employed, I am required to abide by all rules and regulations of the employer.

Signature	Date

Please return this application and other documents requested to:

Keri Lambert, Director, Saint Paul's Episcopal School

email: keri.lambert@spesprosper.org mail: Saint Paul's Episcopal School 420 South Coit Road Prosper, TX 75078

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