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APPLICATION FOR EMPLOYMENT – CLASSIFIED EMPLOYEE

CATOOSA COUNTY PUBLIC SCHOOLS  
P.O. BOX 130  
RINGGOLD, GEORGIA 30736  
706-965-2297

AN EQUAL OPPORTUNITY EMPLOYER  
THE CATOOSA COUNTY BOARD OF EDUCATION DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, RELIGION OR DISABILITY IN EMPLOYMENT OR THE PROVISION OF SERVICES.

Last Name:	First Name:	Middle Name:
Social Security Number:	Today's Date:	Are you under the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address: Number and Street	City:	State and Zip Code
Home Phone:	Business Phone	I am available for work on a: <input type="checkbox"/> Temporary Basis <input type="checkbox"/> Permanent Basis
I am available <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Type of Position Desired: <input type="checkbox"/> Secretarial/Clerical <input type="checkbox"/> Food Service <input type="checkbox"/> Custodial <input type="checkbox"/> Maintenance <input type="checkbox"/> Accounting <input type="checkbox"/> Paraprofessional <input type="checkbox"/> Bus Driver <input type="checkbox"/> Bus Mechanic <input type="checkbox"/> Bus Aide <input type="checkbox"/> Other:	
If you are not a U. S. citizen, under what type of permit do you have the legal right to work in the U.S.?		
<b>CRIMINAL CONDUCT:</b> Have you resigned or been discharged from any position, including the armed forces, while under suspicion of having engaged in criminal, immoral or unprofessional conduct, or are you now under investigation for any such charge? <input type="checkbox"/> Yes <input type="checkbox"/> No  Have you been arrested for a felony or misdemeanor, or pled nolo contendere, or are you now under investigation for any such offense, other than a minor traffic violation? DUI/DWI's MUST BE REPORTED. <input type="checkbox"/> Yes <input type="checkbox"/> No  Have you ever surrendered a teaching certificate, credential, license, permit, or had one denied, revoked or suspended, or is any investigation or adverse reaction now pending against you? <input type="checkbox"/> Yes <input type="checkbox"/> No  <u>If you have answered "yes" to any of the above questions under the criminal conduct section, an explanation and supporting documentation must be attached to this application.</u>		
Any untruthful answers to any question on this application shall constitute good and sufficient cause for termination.		

**EDUCATIONAL BACKGROUND: BEGINNING WITH HIGH SCHOOL OR GED.  
ALSO LIST TRADE SCHOOLS, COLLEGES AND UNIVERSITIES**

School	City, State	Date Attended	Major Subject	Certificate/Degree/Qtr Hours

If applicable to the position you are seeking, indicate other skills, business machines you can operate, computer skills, etc.

GEORGIA PARAPROFESSIONAL ASSESSMENT TEST: PASSED  YES  NO DATE: \_\_\_\_\_

**EMPLOYMENT HISTORY. BEGINNING WITH YOUR PRESENT OR LAST POSITION, LIST THE LAST THREE JOBS YOU HAVE HELD, INCLUDING A SUMMARY OF MAJOR DUTIES, SOFTWARE ACTIVITIES, HARDWARE EXPERIENCE, ETC. (INCLUDING MILITARY EXPERIENCE IF JOB-RELATED. IF YOU HAVE A RESUME, PLEASE ATTACH TO APPLICATION.)**

**EMPLOYER 1**

Name of Employer		Type of Business		
Address		Phone Number		
Dates Employed: From: _____ To _____		Starting Title	Last Title	Final Salary or Hourly Rate:
Name of Supervisor		May we contact now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:	
Brief Description of Duties:				

**EMPLOYER 2**

Name of Employer		Type of Business		
Address		Phone Number		
Dates Employed: From: _____ To _____		Starting Title	Last Title	Final Salary or Hourly Rate:
Name of Supervisor		May we contact now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:	
Brief Description of Duties:				

**EMPLOYER 3**

Name of Employer		Type of Business		
Address		Phone Number		
Dates Employed: From: _____ To _____		Starting Title	Last Title	Final Salary or Hourly Rate:
Name of Supervisor		May we contact now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for Leaving:	
Brief Description of Duties:				

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for hereon will be sufficient cause for cancellation of consideration for employment or dismissal from the company's service if I have been employed.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE STATEMENT AND UNDERSTAND IT.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR SCHOOL USE ONLY**

<b>Name of School or Department</b>	<b>Date to Begin</b>
<b>Job Title</b>	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary – No Benefits
<b>Rate of Pay</b>	<b>Additional Comments</b>
<b>Signature of Administrator:</b>	<b>Signature of Personnel Director</b>
<b>Date:</b>	<b>Date:</b>

**VERIFICATION OF EMPLOYMENT – CLASSIFIED EMPLOYEES**

<b>Name of Employee:</b>		<b>School/Department:</b>	
<b>Position Description:</b>		<b>Number of Years Employed by Catoosa County Public Schools:</b>	
Out-Of-School System Experience			
Name of Company	Years	Months	Job Title
<b>Number of years employed outside the school system in a "like" position:</b>			
<b>Experience granted from outside the system: Divide above by 2:</b>			
<input type="checkbox"/> Place on Step 3. Experience related but not specific. (Principal discretion)			
I certify that the information and the verification of experience listed above is complete and accurate. I have verified the employment experience with each company listed above.			
<b>Signature of Employment Administrator:</b>		<b>Date:</b>	
<b>Date Approved:</b>		<b>Signature of Personnel Director:</b>	