

The Camptonville Academy Application for Employment

The Camptonville Academy is an equal opportunity employer dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religious persuasion, marital status, sexual orientation, veteran status, political belief or disability that does not prohibit performance of essential job functions or any other basis prohibited by federal or applicable state or local law.

Date: _____

I. Personal Information

Name: Last First Middle

Current Address: Street # City County State Zip

UPS Shipping Address: (if different than above)

Email Address: (please print clearly with correct casing and spacing)

Home Telephone Number

Fax Number

Social Security Number

POSITION APPLIED FOR: _____

Have you ever applied to or worked for The Camptonville Academy before: ___ Yes ___ No

If yes, when: _____

Do you have any friends or relatives working for the Academy? ___ Yes ___ No

If yes, who & what relationship: _____

If hired, can you present evidence of our U. S. citizenship or proof of your legal right to live and work in this country? ___ Yes ___ No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? ___ Yes ___ No

If no, describe the functions that cannot be performed: _____

Have you ever been convicted of a criminal offense other than routine traffic violations? ___ Yes ___ No

If yes, state the nature of the crime(s), when & where convicted, and disposition of the case: _____

II. Educational History

High School: _____			
School Name/Location	Yrs. Completed	Degree Type/Diploma	
College/University: _____			
Credentials Held (issuing state, type & expiration date): _____			

Foreign Language(s)/Fluency level: _____			

III. Employment Record

List below all present and past employment, starting with your most recent employer. Account for all periods of unemployment. You must complete this section, even if attaching a resume. Attach additional pages as necessary.

_____		_____		
Company Name (Current or most Recent Employer)		Position Held		

Address:	Street	City	State	Zip

Manager/Supervisor, Title			Telephone Number	
Salary: _____	Per: _____	Dates Employed: From _____ to _____		
Reason for Leaving: _____				
May we contact this employer for a reference? _____ Yes _____ No				

_____		_____		
Company Name (Current or most Recent Employer)		Position Held		

Address:	Street	City	State	Zip

Manager/Supervisor, Title			Telephone Number	
Salary: _____	Per: _____	Dates Employed: From _____ to _____		
Reason for Leaving: _____				
May we contact this employer for a reference? _____ Yes _____ No				

_____		_____		
Company Name (Current or most Recent Employer)		Position Held		
Address:	Street	City	State	Zip
_____		_____		
Manager/Supervisor, Title		Telephone Number		
Salary: _____	Per: _____	Dates Employed: From _____ to _____		
Reason for Leaving: _____				
May we contact this employer for a reference? _____ Yes _____ No				

IV. References

List below three (3) persons not related to you who have knowledge of your work performances within the last three (3) years.

Name	Yrs. Known	Telephone Number
_____	_____	() _____
_____	_____	() _____
_____	_____	() _____

V. Work Availability

If your application receives favorable consideration, when will you be available to begin work? _____

Please Read Carefully, Initial Each Paragraph & Sign Below:

_____ I hereby certify that I have been informed of the duties of the position for which I am applying. I have not knowingly withheld any information, and the information on this application is correct and complete to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed the application. I authorize investigation of all statements contained in this application and authorize The Camptonville Academy to secure information about my experience with former employers, educational institutions and agencies, and for those parties to provide information concerning my experience, releasing all parties from any liability arising there from. I understand that falsification, misrepresentation or any omission of facts called for, regardless of when discovered to be false, may result in immediate termination from employment, removal of my application from consideration or withdrawal of an offer of employment.

_____ This application is only valid for the position(s) applied for at present and The Camptonville Academy is not obligated to retain or consider this application for future openings. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identify and legal right to work in the U. S. If I am offered employment, I will, as a condition of employment, furnish proof that I am over 18 years of age. I will be required to possess a current and valid California driver's license and be insurable if my job requires me to drive in the course of my work. I understand that The Camptonville Academy may require me to submit to a physical examination at any time during my employment, to the extent permitted by law. I understand that The Camptonville Academy reserves

the right to require me to submit to drug and alcohol screens and/or testing prior to employment and during my employment, to the extent permitted by law. I agree that, if I am offered employment, I will be required to conform to the rules and regulations of The Camptonville Academy. I understand and expressly agree that if employed by The Camptonville Academy, storage areas provided for me (locker, desk, etc.) are open to investigation by The Camptonville Academy without prior notice to me.

_____ I request, authorize, and consent to the release of credit report, and/or investigative consumer report concerning me by a credit-reporting agency as designated by The Camptonville Academy. I understand that when such a credit report is obtained, I will be informed of the address and telephone number of the designated reporting agency. I understand that the results of a background check and my records will be used as part of the evaluation of my application and that both verbal and written reports will be obtained from the reporting agency.

_____ I further understand that an investigative consumer report concerning me may include information about my character, general reputation, personal characteristics, and mode of living. I further understand that I am entitled to review any files containing such investigative consumer reports at the offices of the designated credit-reporting agency during normal business hours. I may also receive copies of any such report for a reasonable fee, if I make a written request addressed to the designated credit-reporting agency. I also understand that I may receive a verbal summary of such information by phone, if I make a written request to the designated credit-reporting agency. To receive any of this information or access to records, I realize that I must submit proper identification with my request. The Academy will not deny employment solely on the basis that an applicant has filed bankruptcy.

I have checked this box to indicate that I wish to receive a copy of any consumer credit report, which may be used in connection with my application for employment.

_____ I hereby authorize The Camptonville Academy to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Academy any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Academy, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way relating to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between the Academy and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Academy, and that no promises or representations contrary to the foregoing are binding on the Academy, unless made in writing.

_____ My signature below certifies that I have read, understand, and agree to the foregoing and to the best of my knowledge and belief, the information on the application form is true and correct.

My signature below also certifies that I agree to be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between The Camptonville Academy and me concerning this application for employment.

Applicant's Signature: _____ Date: _____

Applicant's Printed Name: _____ Date: _____

Applicant Information Form

The Camptonville Academy is required to ensure equal employment opportunity for all employees or applicants for employment.

In order to comply with state law regarding nondiscrimination programs and applicant flow data, the Academy requests that you provide the following information. Of course, completion of this form is entirely voluntary. This form will not be made available to any decision-making individual involved in the hiring process, and will be kept in a separate file. Information on this form, or a decision not to complete it, will not be considered in any employment decision. All of the following information will be kept confidential.

I agree to provide the requested information as follows:

1. Name: _____

2. Date of Application: _____

3. Position(s) applied for: _____

4. Race / Ethnic background:

Race / Color: _____ Asian	National Origin / Ancestry: _____ Filipino
_____ Black	_____ Hispanic
_____ Caucasian	_____ Mexican/American
_____ Native American	_____ Polynesian
_____ Other	_____ Chinese
	_____ Japanese
	_____ Other

5. Sex: ___ Male ___ Female

I do not wish to provide the above information. _____ Please initial

Please return this form with your completed employment application to Human Resources