

**COPPER COUNTRY INTERMEDIATE SCHOOL DISTRICT
APPLICATION FOR EMPLOYMENT**

PERSONAL INFORMATION				
Date _____	Social Security Number _____			
Name _____				
Last	First	Middle		
Present Address _____				
Street	City	State	Zip	
Permanent Address _____				
Street	City	State	Zip	
Phone Number _____		Are you 18 years of age or older? _____		
Are you a citizen of the United States? _____		If not, do you intend to become a United States citizen? _____		
If related to anyone in our employ, (other than spouse), state name and department _____				
Referred by _____				

EMPLOYMENT DESIRED		
Position _____	Date you can start _____	Salary desired _____
Are you employed now? _____ If so, may we inquire of your present employer? _____		
Have you ever applied to this district before? _____ When? _____		

EDUCATION	Name and Location of School	Years Attended	Date Graduated	Subjects Studied
Grammar School	_____			
High School	_____			
College	_____			
Trade, Business or Correspondence School	_____			

Subjects of special study or research work _____

Do you speak a second language? If so, indicate _____

Read? _____ Write? _____

U.S. MILITARY SERVICE				
BRANCH OF SERVICE OR EMPLOYED BY	RANK OR POSITION	DATES OF SERVICE	YEARS	MEMO

FORMER EMPLOYERS (List below last four employers, starting with the last one first.)

Date Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

REFERENCES: Give below the names of three persons not related to you, whom you have known at least one year.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

Have you ever been convicted of a crime? _____ If so, when, where and nature of offense? _____

Are there any felony charges pending against you? _____

(OPTIONAL)

HEALTH

Do you have any medical, mental, or physical conditions which need to be considered should you be employed by this district? Yes _____ No _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL.

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

REMARKS: _____

Neatness		Character	
Personality		Ability	

Hired _____ For Dept. _____ Position _____ Will Report _____ Salary _____

Approved: _____

Superintendent or Authorized Representative

**Copper Country Intermediate School District
Notice of Nondiscrimination**

It is the policy of the Copper Country Intermediate School District that no person, on the basis on race, sex, color, religion, national origin or ancestry, age, marital status, disability, weight or height, shall be discriminated against in employment, educational programs and activities or admissions. Questions or concerns regarding the nondiscrimination policies should be directed to Dennis P. Harbour, Superintendent, Copper Country Intermediate School District, 809 Hecla Street, Hancock, MI 49930-1212. (906) 482-4250