

Application for Support Personnel Cheatham County School District

Position Desired: _____ **School Preference:** _____

Personal Information:

Name: _____ **Social Security #:** _____
 Last First Middle

Address: _____ **Phone #:** _____
 Street City State Zip

Date of Birth: _____

*** You must provide a copy of your high school or G.E.D. diploma.**

Education	Name & Location of School	Years Attended	Date Graduated	Subjects Studied
High School				
College				
Trade, Business, Correspondence				
Computer Skills				

Former Employers: Please list the last three employers beginning with the most recent.

Date, Month, & Year	Name, Address, & Phone Number of Former Employers	Salary (optional)	Position	Reason for Leaving

Have you ever been convicted of a felony? ___ YES ___ NO (If "yes," please explain on the back of this application)

Health Concerns: Do you have any health concerns that will prevent you from performing the essential functions of this job with or without reasonable accommodations? ___ YES ___ NO (If "yes," please explain below)

References: Please list the names of three persons **not related to you**, whom you have known for at least one year.

Name	Address and Phone Number	Business	Years Acquainted

To avoid conflicts of interest, please list any relative(s), including school board members, which are employed in the Cheatham County School District and please cite the relationship:

In case of emergency, notify: _____

I authorize the investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period.

Date: _____ **Signature:** _____