

1` *Primary *Discovery *Millennium
Tracy Learning Center
51 E. Beverly Street Tracy, CA 95376
(209) 831-5242 Fax (209) 831-5043
www.tracylc.net

CLASSIFIED EMPLOYMENT APPLICATION

Name _____
Last First Middle

Address _____

City _____ State _____ Zip Code _____

Telephone Number (____) _____ Cell/Message Number (____) _____

Email _____ Social Security # _____

FT _____ **PT** _____

Position you are applying for: _____

School you are interested in:

Primary _____ **Discovery** _____ **Millennium** _____

What experience, skills or qualifications do you have that would especially assist you in performing the duties of this position? _____

Which of the following skills do you have? Typing: (WPM) _____ Computer Skills: Yes _____ No _____

Software you have used: _____

Languages spoken other than English: _____

Have you ever been convicted for any offense against the law? If yes, explain. You may omit minor traffic violations. *Drunk or reckless driving is not a minor offense.* (The existence of a criminal record does not automatically bar you from employment. However, failure to report is cause for disqualification or dismissal).

Have you ever been discharged or forced to resign for misconduct or unsatisfactory service? If yes, please explain. _____

Do you hold a valid California driver's license? Yes _____ No _____

EDUCATION:

Name of High School _____ Years Completed _____ Did you graduate? Yes _____ No _____

Name of College: _____ Years Completed _____ Did you graduate? Yes ___ No ___

Type of Degree: _____

Beginning with your most recent, list all present & past employment.

Employer Name & Address _____

Phone Number _____ Supervisor Name _____

From: Mo/Yr _____ To: Mo/Yr _____ FT _____ PT _____

Duties & Responsibilities: _____

Reason for Leaving: _____

Employer Name & Address _____

Phone Number _____ Supervisor Name _____

From: Mo/Yr _____ To: Mo/Yr _____ FT _____ PT _____

Duties & Responsibilities: _____

Reason for Leaving: _____

Employer Name & Address _____

Phone Number _____ Supervisor Name _____

From: Mo/Yr _____ To: Mo/Yr _____ FT _____ PT _____

Duties & Responsibilities: _____

Reason for Leaving: _____

Personal References (relatives not included)

Name	Address	Telephone

Name	Address	Telephone

Name	Address	Telephone

I HEREBY CERTIFY that all statements made hereon are true and correct other best of my knowledge and authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application. My signature below authorizes release of information in connection with my application for information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release Tracy Learning Center and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: Law enforcement agencies and information for any locality to which they may release of information pertaining to any findings of child abuse or neglect investigations involving me.

SIGNATURE _____ **DATE** _____