



Lake Local School District
 11936 King Church Avenue N.W.
 Uniontown, Ohio 44685

Secretarial Employment Application

Personal Data

Name (last, first, middle) _____ Date _____
 Address _____
 City _____ State _____ Zip Code _____
 Home phone _____ Cell phone _____ Social Security Number _____

Education Record

Type of School	Name and Address	Years Attended	Graduated	Course or Major
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business or Trade			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment History (List in order, last or present employer first)

1. Company Name	Supervisor Name	Job Title	Employed from (month/year)	Reason for Leaving
Duties Performed				
2. Company Name	Supervisor Name	Job Title	Employed from (month/year)	Reason for Leaving
Duties Performed				
3. Company Name	Supervisor Name	Job Title	Employed from (month/year)	Reason for Leaving
Duties Performed				

Additional Information (List membership in professional and civic organizations, special accomplishments, awards, etc.)

Personal References (List three references who are familiar with the quality of your worked, have worked directly with you, are not related to you and have known you at least two years.)

Name	Work Phone	Home Phone	Relationship	Years Acquainted

Have you ever worked for Lake Local Schools before? Yes No If yes, when? _____

Are you interested in being on our sub list? (Fingerprinting required) Yes No

If employed, can you provide proof of U.S. citizenship? Yes No

Special Skills

Typing Yes No Words per minute: _____

Transcription Yes No

Computer skills Hardware
 Software
 Macintosh
 IBM
 Other _____

Please list other skills and/or equipment experience you have acquired.

FOR EMPLOYER'S USE ONLY

Tests Administered	Date	Raw Score	Rating	Comments

Interviewer	Date	Comments

It is understood and agreed that the Lake Local School District may contact former employer(s) for verification of my employment history and compliance with the Bureau of Criminal Identification and Investigation (BCI) for a background check and I hereby consent to such inquiries.

I understand that if I am employed prior to the District's receipt of the BCI report and verification of my work experience, my continued employment will be conditioned on: 1) satisfactory work experience as verified by contacts with former employers; and 2) receipt of a report demonstrating that I am in compliance with the Board of Education's rules and regulations and any other legal requirements regarding applicant/employee criminal records and disclosure of convictions.

I further understand that falsification of any and all information on this application shall result in my being disqualified from employment or in my employment being terminated. By affixing my signature, I agree to the conditions listed on this application and will, if employed, tender my resignation of employment should I fail to fulfill these conditions.

Applications will be kept on active status for two years.

Signature _____

Date _____