

Application for Employment with
WARRENSBURG-LATHAM COMMUNITY SCHOOLS
DISTRICT 11
430 WEST NORTH STREET
WARRENSBURG, IL 62573

APPLICATION OF

SOCIAL SECURITY NUMBER

LAST NAME FIRST NAME MIDDLE NAME

ADDRESS

CITY ST ZIP TELEPHONE (_____) _____

POSITION APPLIED FOR DATE AVAILABLE

RETURN TO:

WARRENSBURG-LATHAM SCHOOL DISTRICT #11
SUPERINTENDENT'S OFFICE
430 WEST NORTH STREET
WARRENSBURG, IL 62573

Warrensburg-Latham School District 11 is an Equal Opportunity Employer
and has an Affirmative Action Program

EDUCATION AND TRAINING

SCHOOL	DATES ATTENDED	NAME AND ADDRESS	GRADUATION MO\DAY\YR	DEGREE\DIPLMA RECEIVED
High School				
College or University				
Special Schools				

EMPLOYMENT RECORD (INCLUDE MILITARY SERVICE)

EMPLOYER AND NAME OF LAST SUPERV	TELEPHONE NUMBER & COMPLETE ADDRESS	POSITION AND DESCRIPTION OF POSITION	EMPLOYMENT		REASON FOR LEAVING
			FROM M\D\YR	TO M\D\YR	

COMPLETE THIS SECTION ONLY IF APPLYING FOR A
CUSTODIAL, MAINTENANCE, OR TRANSPORTATION POSITION

Can you work standing on a ladder or scaffold? Yes _____ No _____

Can you do small maintenance repair jobs that are required around schools?
Yes _____ No _____

Are you willing to do them? Yes _____ No _____

Can you lift 100 pounds? Yes _____ No _____

Can you operate or have experience with floor buffers, other like equipment, mowers, etc? Yes _____ No _____

State special skill area(s): _____

What classification of valid Illinois Drivers License do you hold? _____

COMPLETE THIS SECTION ONLY IF APPLYING FOR A
CLERICAL POSITION

How many words per minute do you type? _____

Do you have data entry experience? Yes _____ No _____ Speed _____

Do you take shorthand? Yes _____ No _____ Speed _____

Do you have experience operating office equipment? Yes _____ No _____

List: _____

What kind of personal computer experience do you have? _____

List names of programs you have used: Word Processing _____

Data Base _____ Spreadsheet _____

Other _____

ALL APPLICANTS SHOULD COMPLETE THIS SECTION

List 4 references: 2 Personal and 2 Professional

NAME	ADDRESS	CITY\STATE	TELEPHONE
------	---------	------------	-----------

Personal

Professional

Who should be notified in case of emergency? _____

Telephone _____

Have you ever been convicted of a felony or other serious crime? _____

Have you ever been dismissed or asked to resign from a position? _____

Do you have any relative currently employed with W-L Schools? _____

If yes, give name and relationship: _____

I understand that before being employed I must pass a physical examination and/or T.B. test approved by the W-L Schools. I authorize all former employers and other persons to give any information they have regarding me, or my employment with them, and I release them and their companies from any liability for damages resulting therefrom. I understand that any false or misleading statements made by me on this application may prevent my employment or may be cause for dismissal if hired.