## REGION 9 SCHOOL OF APPLIED TECHNOLOGY EMPLOYMENT APPLICATION

Position Applied	d For:	Date of Appli	cation:			
Applicant Telep	hone:	Social Securi	y Number:			
Email address: _						
Your Name:						
	Last	First	Midd	Middle		
Address:		Are you legal	y eligible for employ	ment in the U.S?		
		□ Yes □ No	(If yes, verificatio	n will be required)		
		l am seeking a	a permanent position	n: 🗖 Yes 🗖 No		
Are you able to perform the essential functions of the position with or without accommodations?		If necessary for the job I am able to:				
		Work (which : Work overtim				
☐ Yes	□No					
ARE YOU 18 OR	OLDER? Yes No	AVAILABLE S'	TART DATE?			
EDUCATION:		Yrs. Comp	leted Field of Study	y Graduate or Degree		
High School						
College/University						
Business/Technica	al .					
Other			<u></u>			
MILITARY SERV	VICE: Yes No					
Duty/Specialize	d Training:					
REFERENCES: L	ist two personal references	who are not relat	ives or former super	rvisors.		
Name	Address	Telephone	Occupation	Years Known		
Name	Address	Telephone	Occupation	Years Known		

**EMPLOYMENT:** List last employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here. In the summary (following this section) or use an extra sheet of paper if necessary.

Employer Name and Address	Position Title/Duti	Position Title/Duties Skills		Dates Employed	
			from:	to:	
	-				
	7			Reason for Leaving	
	Currente de Nemes	Telembers	-		
	Supervisor's Name:	Telephone:	1		
Employer Name and Address	Position Title/Duties Skills			Dates Employed	
			from:	to	
	_				
			ł		
	7			Reason for Leaving	
	Companying of a Manager	T-11	4		
	Supervisor's Name:	Telephone:			
	,				
Employer Name and Address	Position Title/Dutie	es Skills		Dates Employed	
			from:	to:	
	-				
	1			Reason for Leaving	
	C	***-11	-		
	Supervisor's Name:	Telephone:			
Employer Name and Address	Position Title/Dutie	s Skills	Dates Employed		
			from:	to:	
	-		-		
			1		
	1			Reason for Leaving	
	Communicate Name	Tral and a man	-		
	Supervisor's Name:	Telephone:			
Summarize other employment re	elated to this job:				
Types of computers, other electro	onics or mechanical e	quipment that	you are	qualified to operate or	
repair:		· ·		<u> </u>	
If necessary to the job, typing spe	eed: per minu	te.			
Professional Licenses, Certification	ons or Registrations: _				

	Daytime phone:
Address:F	Relationship:
Information to the applicant: As part of our procedure for application, your personal and employment references may or omitted any facts on this application and are subsequently job. You may make a written request for information derived	be checked. If you have misrepresented y hired, you may be discharged from you
If necessary for employment, you may be required to: supply authorization to work in the U.S, have a physical examination of interest agreement and abide by its terms.	
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I understand and agree to the information shown above:	