

# *Kingfisher Public Schools*

## Employment Application Form

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Telephone (Home) ( \_\_\_\_\_ ) (Business) ( \_\_\_\_\_ ) (Mobile) ( \_\_\_\_\_ )

Position for which applying:  Full-Time  Part-Time

Teacher Assistant  Custodian  Other

Bus Driver  Maintenance \_\_\_\_\_

Secretary \_\_\_\_\_

Do you have the legal right to work in the United States? \_\_\_\_\_

Are you qualified for bonding? \_\_\_\_\_

<u>EDUCATION</u>	Name and Location of School	Grade or Level Completed
High School		
College		
Other		

List any other appropriate training, skills, honors or special studies: \_\_\_\_\_

**REFERENCES:** List three persons not related to you , whom you have known at least one year.

NAME	ADDRESS	OCCUPATION	YEARS ACQUAINTED
1.			
2.			
3.			

### Work Experience Including Military Service

(Begin with latest employment first.) Attach additional page if needed.

Company or School	Address	Dates Worked	Type of Work

This job may require considerable stooping, squatting, climbing, carrying, standing, reaching, etc., on concrete floors each day. Is there any reason that you cannot consistently and promptly perform the job duties for which you are applying?     No     Yes    If yes, please explain:

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You may be required to submit to a physical examination (at school district expense) prior to employment. Would this examination be satisfactory to you?     Yes     No

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PLEASE NOTE:

1. Your application will be retained in our active file one (1) year from the date completed unless a written request is filed to extend the time an additional year.
2. This school district requires a fingerprint felony search for persons who are employed in our system. Your signature below indicates your permission for the fingerprints and the felony search.
3. Your signature below also indicates that the school district may receive confidential statements from your references and maintain the confidential status of those statements, whether written or oral.

To be considered for a position in this school district, read and complete this application. Return all information to:

Dr. Daniel Craig  
Kingfisher Public Schools  
602 W. Chisholm Drive  
Kingfisher, OK 73750

Kingfisher School does not discriminate on the basis of race, color, national origin, sex, age, qualified handicap, or veteran status.

I hereby affirm that all information given in this application is true and complete to the best of my knowledge. I agree to allow this school district to perform a felony fingerprint search and receive confidential statements from references.

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Date

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Signature