

# Whittier Friends School Employment Application

#### Personal Information

| Last Name                        | First Name        | Driver's License Number |  |  |
|----------------------------------|-------------------|-------------------------|--|--|
|                                  |                   |                         |  |  |
| Present Address                  |                   |                         |  |  |
|                                  |                   |                         |  |  |
| Permanent Address or Mailing Add | ress              |                         |  |  |
|                                  |                   |                         |  |  |
| Home Phone Number                | Cell Phone Number | Email Address           |  |  |
|                                  |                   |                         |  |  |
| Emergency Contact                | Relationship      | Emergency Contact Phone |  |  |
|                                  |                   |                         |  |  |
| Emergency Contact Address        |                   |                         |  |  |

#### **Desired Employment**

| Which department(s) are you                              |  |                                       |                |  |
|--|--|---------------------------------------|----------------|--|
| interested in working for?                               | Preschool  | Elementary                            | Office         |  |
| What position are you applying for?                      |  | What date are you available to start? |                |  |
| How did you hear about this p                            | Would you be interested in an alternate position if available? |                                       |                |  |
| Are you employed now?                                    | If so, may we c  | ontact your pres                      | sent employer? |  |
| Have you ever worked for Whittier Friends School before? | When? What position?   |                                       |                |  |
| Defore:  | Reason for leaving   |                                       |                |  |

#### Education

| School Level | Name and Location of School | No. of   | Did you   | Major/   |
|--------------|-----------------------------|----------|-----------|----------|
|              |                             | Years    | Graduate? | Subjects |
|              |                             | Attended |           | Studied  |
| High School  |                             |          |           |          |
|              |                             |          |           |          |
| College      |                             |          |           |          |
|              |                             |          |           |          |
|              |                             |          |           |          |
| Graduate or  |                             |          |           |          |
| Professional |                             |          |           |          |
| Program      |                             |          |           |          |
| Additional   |                             |          |           |          |
| Schooling    |                             |          |           |          |
|              |                             |          |           |          |

**Specialized Training** - Please list any Early Childhood Education courses, computer classes, or other specialized skill classes you have taken (and passed with a C or better) or equivalent seminars you have attended.

| Class Name | Class Number |       | Location |
|------------|--------------|-------|----------|
|            |              | Units |          |
|            |              |       |          |
|            |              |       |          |
|            |              |       |          |
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|            |              |       |          |
|            |              |       |          |

### **Employment Eligibility**

|                               | Yes | No | Do Not Know |
|-------------------------------|-----|----|-------------|
| Are you 18 years or older?    |     |    |             |
| Are you either a U.S. citizen |     |    |             |
| or an alien authorized to     |     |    |             |
| work in the U.S.?             |     |    |             |
| Are you bondable?             |     |    |             |
| Have you ever been convicted  |     |    |             |
| of a crime? If yes, please    |     |    |             |
| explain below.                |     |    |             |
|                               |     |    |             |
|                               |     |    |             |
|                               |     |    |             |
|                               |     |    |             |
|                               |     |    |             |
|                               |     |    |             |

**Former Employers** - Please list your most recent (or current) employer first. Use the subsequent sections to list employment relevant to the position for which you are applying.

| Name of Present  |            |                          |                       |       |                                 |
|--|------------|--------------------------|-----------------------|-------|---------------------------------|
| or Last Employer   |            |                          |                       |       |                                 |
| Address  |            | City                     |                       | State | Zip                             |
| Starting Date  | Leaving Da | te                       | Job Title(s)          |       |                                 |
| Starting Hourly Wage or Year   | rly Salary | Final Hourly W           | Wage or Yearly Salary |       | May we contact your supervisor? |
| Name of Supervisor   |            | Supervisor's Title Phone |                       | Phone |                                 |
| Description of Work  |            |                          |                       |       |                                 |
|  |            |                          |                       |       |                                 |
| Skills learned in this position that will help you in the position for which you are applying: |            |                          |                       |       |                                 |
|  |            |                          |                       |       |                                 |
| Reason for Leaving   |            |                          |                       |       |                                 |
|  |            |                          |                       |       |                                 |

| Name of                         |                  |                                    |                         |                     |                                 |
|---------------------------------|------------------|------------------------------------|-------------------------|---------------------|---------------------------------|
| Employer                        |                  |                                    |                         | <b>,</b>            |                                 |
| Address                         |                  | City                               |                         | State               | Zip                             |
| Starting Date                   | Leaving Da       | nte                                | Job                     | Title(s)            |                                 |
| Starting Hourly Wage or Ye      |                  | Final Hourly W                     |                         |                     | May we contact your supervisor? |
| Name of Supervisor              |                  | Supervisor's Tit                   | Supervisor's Title Phoi |                     |                                 |
| Description of Work             |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
| Skills learned in this position | n that will he   | In you in the nos                  | ition                   | for which you are   | annlying:                       |
| skins learned in this position  | r triat will ric | ip you iii tiic pos                | icion                   | ioi wiiicii you are | арріушу.                        |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
| Reason for Leaving              |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
| Name of                         |                  |                                    |                         |                     |                                 |
| Employer                        |                  |                                    |                         | T                   |                                 |
| Address                         | Address          |                                    |                         | State               | Zip                             |
| Starting Date                   | Leaving Da       | nte                                | lob                     | Title(s)            |                                 |
| <del>-</del>                    |                  |                                    |                         | · ·                 | May we contact                  |
| Starting Hourly Wage or Ye      | arly Salary      | Final Hourly Wage or Yearly Salary |                         | your supervisor?    |                                 |
| Name of Supervisor              |                  | Supervisor's Title Phone           |                         |                     |                                 |
| Description of Work             |                  | •                                  |                         |                     |                                 |
|                                 |                  |                                    |                         |                     | _                               |
|                                 |                  |                                    |                         |                     |                                 |
| Skills learned in this position | n that will he   | lp you in the pos                  | ition                   | for which you are   | applying:                       |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
| Reason for Leaving              |                  |                                    |                         |                     |                                 |
| neason for Leaving              |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
| Please explain any gaps in e    | nployment o      | r list recent empl                 | oyers                   | not relevant to th  | is position                     |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |
|                                 |                  |                                    |                         |                     |                                 |

## **References** - Please give the names of three persons you are not related to, whom you have known at least one year.

| Name | Address | Phone | Occupation/ | Years<br>Acquainted |
|------|---------|-------|-------------|---------------------|
|      |         |       | Business    | Acquainted          |
|      |         |       |             |                     |
|      |         |       |             |                     |
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Additional Notes: