|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Date: |  |

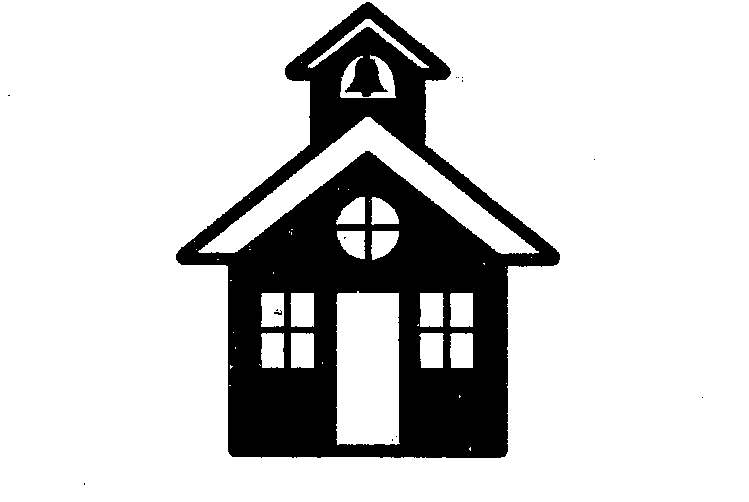
E-Mail:

**BATH COUNTY SCHOOLS**

405 WEST MAIN STREET

OWINGSVILLE, KY 40360

(606) 674-6314



Classified Position Application Form

Position

FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Copy of GED or Diploma |  |
| Letters of Reference |  |
| Para-Professional Test |  |
| Physical |  |
| Criminal Check |  |
| W-4 Forms |  |
| I-9 Forms |  |
|  |  |
| **SIGNATURE FORM**  **Please read carefully and sign below.** | | |

For this type of employment, State Law requires a state and federal background check and a complete physical including a TB skin test as a condition of employment.

Please include the following along with this application:

* 1. Copy of GED or Diploma
  2. Two Letters of Reference
  3. Para-Professional Test (Test can be taken at Adult Education Building)

**(This application will not be valid unless all of the above information is received.)**

I understand that the Bath County School District may want to verify the statements I have made on this application. I hereby give my permission for the Bath County School District to request and review employment records from previous employers, court records and police records from any local, state or federal agency keeping such records. I also authorize the Bath County School District to obtain oral and written recommendations from the persons listed on this application, from all employers and from persons listed as personal references.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Applicant: |  | Date: |  |

It is the policy of the Bath County School system not to discriminate on the basis of race, color, religion, sex, national origin, age or disability in its educational programs or employment policies.

**Bath County Board of Education is an Equal Opportunity Employer**

1. **PERSONAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| Social Security Number |  | DOB |
|  |  |  |
| Last Name | First Name | Middle Name |
|  |  |  |
| Address (Current) | City | State ZIP |
|  |  |  |
| Home Phone |  | Business Phone |
| Are you related to any Bath Co. Board of Education Member? | |  |
|  |  |  |
|  | |  |

1. **PROFESSIONAL INFORMATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Are you currently employed by Bath County Schools? | | |  | |
| 1. How long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Position for which you are applying: | | |  | |
|  |  | |  | |
| 1. When would you be available for this position? | |  | | |
| 1. Why are you leaving your present position? | |  | | |
|  | | |  |  |

1. **Bus Driver Applicants Information Only**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  |  |  | | |  | | |  |
| Current Drivers License: | |  |  | Operator’s: |  | CDL: |  | | |  | | |  |
| Other: |  |  |  | Number: |  | State: | |  | |  | | |  |
| Expiration Date: | |  |  |  |  |  |  | | |  | | |  |
| Have you had any type of vehicle accidents in the last three (3) years? | | | | | | Yes |  | | No | | |  |  |
| If yes, give approximate dates | | | |  |  |  |  | |  | | | |  |
| Has your driver’s license been suspended or revoked? | | | | | | Yes |  | | No | |  | |  |
| ***Please furnish copy of license.*** | | |  |  |  |  |  | |  | | | |  |

1. **General**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Community Activities: | |  |  |  |  |
|  | | | | | |
|  | | | | | |
| Organizations: | |  |  |  |  |
|  | | | | | |
|  | | | | | |
| Awards or Special Honors: | |  |  |  |  |
|  | | | | | |
|  | | | | | |
| Have you ever been dismissed, fired or discharged from a position of employment based on a claim of misconduct or unsatisfactory performance? | | | | | |
|  | | | | | |
|  |  |  |  |  |  |
| Have you ever been convicted of a felony? | |  |  | | |
|  |  |  |  |  |  |

**EDUCATIONAL HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| GRADE SCHOOLS, HIGH SCHOOL & COLLEGES | LOCATION | DATES ATTENDED  FROM TO | DIPLOMA/DEGREES | DATE |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**GED Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WORK EXPERIENCE**

|  |  |  |
| --- | --- | --- |
| COMPANY & LOCATION | DATES  FROM TO | NATURE OF WORK |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**REFERENCES** (List Persons Acquainted with your former employment. Include your present supervisor.)

|  |  |  |  |
| --- | --- | --- | --- |
| NAME | POSITION | COMPLETE ADDRESS | TELEPHONE |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |
| --- |
| **PERSONAL STATEMENT**  Please write a personal statement describing why you are applying for a classified position with the Bath County Public School System and how you are qualified for this position. |
|  |