



**REFERENCES:** List three persons who are not related to you, who have definite knowledge of your qualifications and fitness for the position for which you are applying.

Full Name	Address	Phone	Occupation

**LIST BELOW PRESENT AND PAST EMPLOYMENT (beginning with your most recent)**

Dates		Hours per week	Employer- Name, Address & Phone
From	To		

**HIGH SCHOOL/COLLEGE EDUCATION: (Please list most recent first)**

School -Location	Graduate?	Total Units or Degree	Major/Minor

Do you have any relatives now employed by the District? Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ School/Office \_\_\_\_\_

I, HEREBY, CERTIFY that all statements made herein are true and correct to the best of my knowledge, and authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application.

I also authorize and request every person, firm, company, corporation, governmental agency, school district or institution having control of any documents, records and other information pertaining to me, to furnish to the District or its representatives any such information, including documents or records, or any other pertinent data, and/or to permit the District or its representatives to inspect and make copies of such documents, records, and other information. I understand and agree that no document, record or information of any kind pertaining to me, shall be a basis for any legal action by me or on my behalf.

As an inducement to the District to investigate and reach a determination respecting my employment qualifications and fitness, I hereby release, discharge and exonerate the District, its agents and representatives, and any person or entity furnishing oral reports, documents, records or other information, including but not limited to information or documents which may be untrue, defamatory, misleading or damaging in any way, from any and all liability of any nature arising out of any such investigation, or out of the furnishing, inspection or use of such reports, documents, records and other information. I also understand and agree that all oral and written responses to the District’s inquiries shall remain confidential and shall not be divulged to the applicant.

I understand that any significant omission, false answered statement made by me on this application, or any supplement to it will be sufficient grounds for disqualification or dismissal.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Complete application packet will include 3 items: 1) cover letter or letter of introduction, 2) resume and 3) application**

Office Use Only: Date rec'd: _____ Packet complete: Yes ___ No ___
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