

Classified Employment Application

District #62-0063 Bridgeport Public Schools

Please return complete application to:

Bridgeport Public Schools

Attn: Superintendent's Office

PO Box 430

Bridgeport NE 69336

Tel. #:(308) 262-1470 Fax #: (308) 262-0444

Please complete this application using blue or black ink. Upon completion, this application must be returned to the office listed above to be processed.

Please indicate which classified position(s) you would like to apply for with Bridgeport Public Schools:

___ Custodian

___ Food Service

___ Bus Driver

___ Groundskeeper

___ Clerical

___ Maintenance

___ Paraprofessional

Other: _____

Are you applying for an advertised position?

___ YES

___ NO

If yes, please state which position: _____



For office use only:

Date application received by the Superintendent's office: _____

Copies of application distributed to:

_____ *Maintenance*

_____ *Food Service*

_____ *Transportation*

_____ *Building Admin* ___ *Elem.* ___ *HS*
(circle which level)

Distributed By: _____ *Date:* _____

Classified Employment Application

Name: _____

Mailing Address: _____

Home Telephone #: _____ Work Phone #: _____

Social Security #: _____ Driver's License#: _____

Position Applying For: _____

Date Available for Work: _____ Rate of Pay Expected: _____

PREVIOUS EMPLOYMENT: beginning with the most recent

Employer: _____ Position: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Starting Salary: _____

Employment Dates: _____ Ending Salary: _____

Supervisor: _____ Duties: _____

Reason for Leaving _____

Employer: _____ Position: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Starting Salary: _____

Employment Dates: _____ Ending Salary: _____

Supervisor: _____ Duties: _____

Reason for Leaving _____

Employer: _____ Position: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Starting Salary: _____

Employment Dates: _____ Ending Salary: _____

Supervisor: _____ Duties: _____

Reason for Leaving _____

We reserve the right to contact any previous employer. If you prefer that we not contact an employer listed on this page, please list the employer and reasons below:

PERSONAL/CHARACTER REFERENCES:

Name: _____ Length of Acquaintance: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Relationship to you: _____
No Relatives Please. (i.e. friend, co-worker, neighbor, banker, etc.)

Name: _____ Length of Acquaintance: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Relationship to you: _____
No Relatives Please. (i.e. friend, co-worker, neighbor, banker, etc.)

Name: _____ Length of Acquaintance: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Relationship to you: _____
No Relatives Please. (i.e. friend, co-worker, neighbor, banker, etc.)

Name: _____ Length of Acquaintance: _____

Mailing Address: _____ Town: _____ State: _____

Telephone #: _____ Relationship to you: _____
No Relatives Please. (i.e. friend, co-worker, neighbor, banker, etc.)**EDUCATION:**

Degree Earned	Date Awarded	Years	Name of School	Location (City & State)
High School Diploma or G.E.D.				
College Degree				
College Degree				
Vocational Education				
Other				

List any additional training, inservice, or professional membership/organization in which you have recently participated.

1. Have you ever been convicted of a crime, other than a minor traffic violation? YES ___ NO ___

2. Have you ever been convicted of a felony or a crime involving dishonesty, a controlled substance or a child? YES ___ NO ___

3. Have you ever entered into a criminal diversion agreement after being charged with any offense described in question #2? YES ___ NO ___

4. Are criminal charges pending against you in any state involving any of the offenses described in question #2? YES ___ NO ___

If you answered YES to any of the questions listed above, please explain:
(Use additional paper if necessary.)

Applicant's Statement

These answers are true and complete to the best of my knowledge. The school may investigate all statements contained in this application and I understand that any false or misleading information provided during the application or interview process will result in the immediate discharge if I am hired, regardless of when discovered. I understand that this application is not a contract of employment. I also understand that if hired regardless of any oral representations to the contrary, the employee relationship between me and the school is Terminable-At-Will so that both the school and I remain free to choose or end our work relationship at any time for any or no reason. Any changes in this employment relationship must be made in writing.

I also understand that any offer of employment may be conditioned upon a health evaluation by a doctor selected by the school, to determine whether I can perform the job duties. In addition, I understand a drug or alcohol test may be required depending upon school policy. I authorize the school to make a thorough investigation of my past employment, education and job-related activities and I release from all liability all persons, companies, and corporations supplying such information. I also indemnify this school against liability, which might result from making such investigation. I also understand a background check will be performed.

Additionally, I authorize the school to supply my employment record in its sole discretion, in whole or in part, to any prospective employer, government agency, or other party, with an interest that the school deems appropriate.

Signature of Applicant _____

Date _____

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin or disability.

Revised 01/19/09