HOLMES DISTRICT SCHOOL BOARD

701 East Pennsylvania Avenue Bonifay, Florida 32425 PH(850)547-9341 ~ FX(850)547-0381

APPLICATION FOR INSTRUCTIONAL EMPLOYMENT

PERSONNEL

[Please Print or Typ	e]							
Date of Application	Month Day	Year	Phone Number		U.S. Citizen?	☐ Yes ☐ No		
Name								
Address	(Last) (First)				(Middle)			
(No.)		(Street)	(City)	(State)		(Zip)		
Position(s) applied	for		□ Full Time	☐ Part Time				
Have you worked fo	r us before?	If YES, When	?	Pos	sition			
Indicate special qualifications or skills								
NOTE: The items below are voluntary and are collected for Equal Employment Opportunities and for record keeping only, not for employment decisions.								
Date of Birth:/ Gender: □ Male □ Female Ethnic Identification: Hispanic/Latino □ Yes □ No								
Race: 🗆 White, Non-Hispanic 🗀 Black/African American 🗀 Hispanic 🗀 Asian 🗀 Native Hawaiian or Other Pacific Islander 🗀 American Indian/Alaskan Native								
BACKGROU	ND INFOR	RMATION						
Are you a U.S. Citize	n?	If NO, can you legal	lly remain permanently in	the United States?				
Have you ever been	bonded in prior e	employment?	_ If YES, list name(s) of e	employer(s):				
Have you ever been convicted of a Felony or a first degree misdemeanor? If YES, list convictions:								
Have you ever receiv	ved Worker Com	pensation benefits?	If YES, when? _					
Type of injury?								
Do you have a disability which would limit or prohibit you from performing the work for which you have applied? If YES explain								
EDUCATION								
NAME & LOCATION	OF SCHOOL		COURSE	OF STUDY	YEARS COMPLETED	DID YOU GRADUATE?		
Elementary								
High School								
College			Major: Degree:					
Other			Degree.					

EMPLOYMENT RECORD	[Begin With Most C	urrent Job]			
Employer		Phone	From	То	
Address		<u> </u>	Position	I	
Duties	Supervisor's name				
			Starting Salary	/Wages	
Reason for Leaving			Final Salary/Wa	ages	
Employer		Phone	From	То	
Address		I	Position	I	
Duties	Supervisor's name				
			Starting Salary	/Wages	
Reason for Leaving	Final Salary/Wages				
Employer		Phone	From	То	
Address		<u> </u>	Position	I	
Duties			Supervisor's na	ame	
			Starting Salary	/Wages	
Reason for Leaving			Final Salary/Wages		
			I		
PERSONAL REFERENCI	ES				
Name	Addre	ess		Phone Number	
CERTIFICATION/LICENS	SURE [EX. Drivers Lie	cense, Teacher Certification, et	c.]		
Application Date or Certification No.		Type	Expiration	Date	
	(Attach Copy)		<u> </u>		
Subjects Covered:					
Drivers License: State(Attach Copy	Type y)	No	Expiration Date		

To be eligible for employment in the Holmes County School System, you will be required to submit a complete set of fingerprints. New employees will be on probationary status pending fingerprint processing and determination of compliance with standards of good moral character.

I hereby certify that, to the best of my knowledge and belief, the answers made herein are true. I understand false information is sufficient grounds for dismissal.

If employed, I agree to abide by the rules and regulations as set forth by the Holmes District School Board as necessary to the proper conduct of its business.

Signature of Applicant	

If you need any special accommodations, please contact the Superintendent's office at 1-850-547-9341.

Holmes District School Board does not discriminate on the basis of race, color, national origin, gender, age, disability, marital status or genetic information in its educational programs, services or activities, or in its hiring or employment practices. The district also provides equal access to its facilities to the Boy Scouts and other patriotic youth groups, as required by the Boys Scout of America Equal Access Act. Questions, complaints, or requests for additional information regarding discrimination or harassment may be sent to:

Name and/or Title: ____Carmen Bush____

Office Address: 701 East Pennsylvania Ave. Bonifay, FL 32425

Phone Number (Voice/TDD): <u>850-547-5928 x 253</u>

E-mail: ____bushc@hdsb.org____