

FOR OFFICE USE ONLY
PRIMARY AREA OF INTEREST _____
_____
DATE INTERVIEWED _____
_____

MCS is a smoke free and drug free workplace

Manchester Community Schools administers Post-offer preemployment drug tests as a condition of employment for the position of a Bus Driver.

Manchester Community Schools supports the principle that all persons are entitled to equal employment opportunity without regard to race, religion, color, marital status, national origin, sex, age, handicapping conditions or limited English proficiency. If you have a disability which affects your ability to complete this application let us know so that other arrangements can be made.

**PERSONAL DATA**

Name (last, first, middle) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Date available for employment \_\_\_\_\_

Military service: induction date \_\_\_\_\_ separation date \_\_\_\_\_ branch \_\_\_\_\_

Duties in the service: \_\_\_\_\_

Special training (explain): \_\_\_\_\_

Are you interested in year-round employment?  Yes  No School-year employment?  Yes  No

Would you consider part-time employment (less than 8 hours a day)?  Yes  No

If you would consider part-time employment, what hours are you available? \_\_\_\_\_

MCS area within reasonable distance of your residence: \_\_\_\_\_

Have you ever been employed by MCS?  Yes  No

If yes, former position at MCS \_\_\_\_\_ School/Unit \_\_\_\_\_

Date employed \_\_\_\_\_ Date employment ended \_\_\_\_\_

Reason for ending employment with MCS \_\_\_\_\_

List any city/state where you have lived in previous 10 years: \_\_\_\_\_

Have you ever been convicted of any crime?  Yes\*  No

If yes, was the crime a felony?  Yes\*  No What year? \_\_\_\_\_ What state? \_\_\_\_\_

Explain. \_\_\_\_\_

If no, was the crime a misdemeanor other than minor traffic violation?  Yes\*  No

What year? \_\_\_\_\_ What state? \_\_\_\_\_ Explain. \_\_\_\_\_

Do you currently have any pending criminal charges?  Yes\*  No If yes, explain \_\_\_\_\_

\* A yes answer will not of itself automatically exclude an applicant from consideration for employment.

**EDUCATION**

Circle number of years completed:	School and location	year of graduation	course or major
High School 9 10 11 12	_____	_____	_____
Technical School 1 2 3	_____	_____	_____
College 1 2 3 4	_____	_____	_____
Post Graduate 1 2 3	_____	_____	_____

**EMPLOYMENT HISTORY** – List **All** previous jobs held starting with the **most recent** job

Employer and address	Immediate Supervisor	Date began (month/day/year)	Date left (month/day/year)	Assignment/ Position	Hourly/ Weekly pay rate	Reason for leaving

If additional space is needed, please include a separate page.

**PROFESSIONAL STATUS**

Have you ever been terminated from a job or asked to resign? \_\_\_ Yes \_\_\_ No

If yes, where, date, reason? \_\_\_\_\_

Within the past five (5) years, have you received an unsatisfactory evaluation from an employer? \_\_\_ Yes \_\_\_ No

If yes, explain. \_\_\_\_\_

**REFERENCES**

List three references **not employed** by Manchester Community Schools that we may contact. Do not use relatives.

1. Name \_\_\_\_\_ Street address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Ext. \_\_\_\_\_

2. Name \_\_\_\_\_ Street address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Ext. \_\_\_\_\_

3. Name \_\_\_\_\_ Street address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Ext. \_\_\_\_\_

List individuals you personally know who are now employed by Manchester Community Schools.

1. \_\_\_\_\_ 3. \_\_\_\_\_  
 2. \_\_\_\_\_ 4. \_\_\_\_\_

**POSITIONS/QUALIFICATIONS**

Below are listed various classified positions in Manchester Community Schools. Please check your first and second choices of positions for which you are qualified and are applying. On the lines provided below, describe your qualifications for each area you check.

**MEDICAL**

\_\_\_ Nurse (RN)

**TRANSPORTATION**

\_\_\_ Bus Driver

**CUSTODIAL**

\_\_\_ Custodian

**CLERICAL**

\_\_\_ Secretary

\_\_\_ Payroll/Treasurer

**SCHOOL SUPPORT**

\_\_\_ Administrative Assistant

**FOOD SERVICE**

\_\_\_ Cook

\_\_\_ Food Service Manager

**INSTRUCTIONAL SUPPORT**

\_\_\_ Audio/Visual Paraprofessional

\_\_\_ Library/Study Hall

\_\_\_ Instructional

\_\_\_ Recess

**Other**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of your qualifications for each area you have checked: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any other experiences, skills or qualifications that you feel would especially qualify you for a position with Manchester Community Schools? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please write a brief statement about why you believe you should be employed by Manchester Community Schools.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ACKNOWLEDGEMENT OF TERMS OF APPLICATION**

In making this application for employment, I understand that an investigative report may be made whereby information is obtained through personal interviews and/or reference forms with third parties, law enforcement agencies, prior employers, coworkers and others. This inquiry may include information as to my character, general reputation, personal characteristics, and mode of living, whichever may be applicable. I hereby acknowledge that, (for bus driver applicants only) at the time of my post-offer preemployment physical examination or for reasonable suspicion subsequent to employment, blood and or/urine samples may be taken and tested for evidence of consumption by me of illegal drugs and/or alcohol. I consent to such testing, and hereby release, discharge and waive any and all claims I now or may in the future have against Manchester Community Schools and/or medical personnel related to such tests or the results thereof. I further understand that if an offer of employment is made, I will be required to submit documentation which will verify that I am a citizen or a national of the United States, an alien lawfully admitted for permanent residence, or an alien authorized to be employed in the United States.

I affirm that I have never been convicted, or charged with and had the charges plea-bargained to a lesser offense, of any of the following offenses involving children as defined by Indiana Code: rape, criminal deviate conduct, child molesting, child exploitation, vicarious sexual gratification, child solicitation, incest, child selling, child seduction, or sexual battery.

I certify that this application was completed by me and I hereby affirm that the statements made in this application are true to the best of my knowledge and belief. I understand that the future employment may be terminated if I have misrepresented information submitted.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant

**TO BE COMPLETED AFTER EMPLOYMENT OFFER**

Social Security Number \_\_\_\_\_ Marital Status: \_\_\_Single \_\_\_Married

Race \_\_\_\_\_ Sex \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_

If previously a member of the Public Employees' Retirement Fund, what was your Fund Number? \_\_\_\_\_

Do you have any physical or mental limitations which may affect your ability to perform your position duties?

\_\_\_Yes \_\_\_No If yes, describe limitations and indicate accommodations necessary for you to perform essential

functions of your position. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_