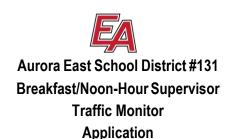


Last Name		Fire	st Name		Middle Initial
Other name(s) u	under which transo	cripts, certificates, a	nd former applicati	ons may be listed:	
Last Name		Fire	st Name		Middle Initial
Address & Pho	one				
Number & Stree	et:				Apt. Number:
City:				State:	Zip Code:
Daytime Phone:	:			Home/Cell Phone:	
Experience					
Current or Most Recent Position:				Employer Address & Phone:	
Dates of Employ				Reason for Leaving:	
Previous Position Held:				Employer Address & Phone:	
Dates of Employment:				Reason for Leaving:	
Education High School:				Graduation Status:	
Language Skill Do you know an		than English?		Language(s):	
Oral Level: Written Level:	Fluent Fluent	Literate Literate	Polite Polite		



Professional References

Reference 2	Reference 3
Name:	Name:
Phone:	Phone:
Relationship:	Relationship:
Years Known:	Years Known:
	Name:Phone:Relationship:

Legal Information

Please note: Applicants are not obligated to disclose sealed or expunged records of conviction or arrest.

Are you eligible to work in the United States?
Have you ever been convicted of a criminal offense other than a minor traffic violation?
Have you ever had any indicated finding of child abuse filed in your name?
Does your name appear on any Sex Offender Database in any state or country?

Confirmation

Section 10-21.19 of The School Code of the State of Illinois stipulates that an applicant for employment with a school district is required, as a condition of employment, to authorize a fingerprint investigation to ascertain if the applicant has been convicted of certain criminal offenses. The School Code also stipulates that the School District perform a check on the Statewide Sex Offender Database. Should I be a candidate for employment with Aurora East District #131, I agree to authorize both investigations and will allow myself to be fingerprinted as a part of this investigation. Candidate may not be employed unless such investigation has been initiated.

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in the application to verify my statement, and I authorize past employers, all references and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.



Signature	Date	