



COMMUNITY EDUCATION
GADSDEN CITY SCHOOLS
APPLICATION FOR NONCERTIFIED POSITION



Date of Application _____

Position(s) Applied For: _____

PERSONAL DATA

Name: _____
(Must appear the same as on your social security card)

Address: _____
Number Street City State Zip Code

Telephone: _____ Day _____ Night Cell Phone: _____

EDUCATION INFORMATION

Please circle highest K-12 grade completed: K 1 2 3 4 5 6 7 8 9 10 11 12

G.E.D. _____ Higher Education Degree: _____ Major: _____ Minor: _____

GENERAL INFORMATION

Have you filed an application with the Gadsden City Schools before? _____ Give Date: _____

Have you ever been employed with by Gadsden City Schools before? _____ Give Date: _____

Are you employed now? _____ If yes, employed with whom? _____

May we contact your present employer? _____

On what date would you be available for work? _____

Are you on a lay-off and subject to recall? _____

EMPLOYMENT INFORMATION
List all jobs you have held in the last five (5) years

Job/Position	Employer	Employer Address	Start Date	Left Date

REFERENCES
Give three (3) personal references (not relatives)
1. Name: _____ **Title:** _____

Name of Business: _____ **Telephone No.:** _____

Business Address: _____

2. Name: _____ **Title:** _____

Name of Business: _____ **Telephone No.:** _____

Business Address: _____

3. Name: _____ **Title:** _____

Name of Business: _____ **Telephone No.:** _____

Business Address: _____


Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap.

As employers/government contractors, we comply with government regulations and affirmative action responsibilities, including the after hire use of E-Verify to confirm U.S. employment eligibility.



All school system employees are subject to a criminal background check. By filing this application for employment, I give consent to the representatives of the Gadsden City Schools to contact references, previous employers, schools attended, court officials, and law enforcement authorities.

I understand that any misstatement or omission of any information requested shall be a reason for non-renewal of contract or dismissal from employment.

The application, transcript, references and any other application information are the property of the Gadsden City Schools and will not be returned to the applicant. This application will be considered active for three years.

Applicant Signature

Date

It is the policy of the Gadsden City Schools that no person shall be denied the benefits of any education program or activity on the basis of race, color, handicap, creed, national origin, age or sex:

Discrimination Contacts:

Dr. Donna Smoots, Section 504 Compliance Officer, P.O. Box 184, Gadsden, AL, 35902
or call (256) 543-3512

Mr. Keith Blackwell, Title VI and IX Compliance Officer, P.O. Box 184, Gadsden, AL, 35902
or call (256) 543-3512

APPLICANT DATA RECORD



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As employers/government contractors, we comply with government regulations and affirmative action responsibilities, including the use of E-Verify to confirm U.S. employment eligibility.

Solely to help us comply with government record keeping, reporting and other legal requirements, please fill out this Applicant Data Record. We appreciate your cooperation.

PLEASE PRINT

Date: _____

Position(s) applied for: _____

Name: _____ Telephone No.: _____

Address: _____

Affirmative Action Survey

Government agencies require periodic reports on the sex, ethnicity, handicapped and veteran status of applicants. This data is for analysis and affirmative action only. Submission of information is voluntary.

Check one: Male Female Date of Birth: _____

Check one of the following: White Black Hispanic
 American Indian/Alaskan Native
 Asian/Pacific Islander
 Other Please Specify: _____

Check if any of the following are applicable: Vietnam Era Veteran
 Disabled Veteran
 Handicapped Individual