

Application for Classified Position
NORTHERN HUMBOLDT UNION HIGH SCHOOL DISTRICT
2755 McKinleyville Avenue
McKinleyville, CA 95519
phone: (707)839-6470 fax: (707)839-6477
email application to: tpires@nohum.k12.ca.us or apply online

Date available for employment: _____

Name _____ email address: _____
 First Middle Last

Mailing Address: _____ () _____
 Number/Street City Zip Phone

POSITION(S) FOR WHICH YOU ARE APPLYING: _____

Can you, after employment, submit verification of your legal right to work in the United States? () Yes () No

Are you related to any employee of the district? () Yes () No If yes, please complete the following:

Employee name: _____ Relationship _____

Do you have a physical condition or handicap which may limit your ability to perform the job applied for?

() Yes () No If the answer is yes, what can be done to accommodate your limitations? _____

Summary of Education and Skills (Please fill in the schedule below – describe degrees, such as AA (Art), B.A. (Art), M.S. (Chemistry), etc.

School or Institution	NAME AND LOCATION	Did you Graduate?	Degree or Certification
High School			
Other College or University			
Graduate School			
Business, Trade Service School			

Do you have any specialized training, special skills, certificates or licenses relevant to the job for which you are applying? () Yes () No If yes, please describe: _____

Have you ever been discharge or forced to resign from any position? () Yes () No If yes, give details: _____

Have you ever been convicted of any crime, except for traffic offenses, such as faulty equipment, parking or speeding, in any civil or military court of law? () Yes () No If yes, list offense, place, date and penalty (conviction is not necessarily bar to employment, except in cases where it may be related to the job.) _____

Have you been arrested for any felony or misdemeanor for which you are currently out on bail or on your own recognizance? () Yes () No If yes, list offense, place, and date or attach a separate sheet: _____

Have you ever been convicted of any felony or misdemeanor? () Yes () No If yes, list offense, place, date and penalty or attach a separate sheet: _____

All of the following apply to this question: a) A conviction includes a plea or verdict of guilty, a finding of guilt by a court in a trial without a jury, or a conviction following a plea of nolo contendere, b) You may exclude convictions for marijuana related offenses more than two years old; c) Expungement, discharge or other order by a court under Section 1203.4 of the Penal Code does not relieve you of your obligation to report all other felony or misdemeanor convictions on this application, d) State law requires all applicants prior to employment to be fingerprinted, e) Although generally a conviction does not bar employment, state law prohibits employment of any person convicted of certain sex and narcotic offenses and certain serious or violent felonies.

May we contact your employers if considering you for a job offer? () Yes () No

If the position for which you are applying requires specific work experience, indicate the amount.

Years _____ Months _____

List your work experience, beginning with your present or most recent job. Show promotions as separate jobs.

**Important: check box if the job gave you specific experience for the position for which you are applying.*

<input type="checkbox"/>	Dates of Work From _____ Month/Year To _____ Month/Year Part time () Hours/week _____ Full time () Hours/week _____	Employer's Name _____ Address _____ Supervisor's Name _____ Title _____ Your Job Title _____ Describe your duties _____ _____ Reason for leaving _____
<input type="checkbox"/>	Dates of Work From _____ Month/Year To _____ Month/Year Part time () Hours/week _____ Full time () Hours/week _____	Employer's Name _____ Address _____ Supervisor's Name _____ Title _____ Your Job Title _____ Describe your duties _____ _____ Reason for leaving _____
<input type="checkbox"/>	Dates of Work From _____ Month/Year To _____ Month/Year Part time () Hours/week _____ Full time () Hours/week _____	Employer's Name _____ Address _____ Supervisor's Name _____ Title _____ Your Job Title _____ Describe your duties _____ _____ Reason for leaving _____
<input type="checkbox"/>	Dates of Work From _____ Month/Year To _____ Month/Year Part time () Hours/week _____ Full time () Hours/week _____	Employer's Name _____ Address _____ Supervisor's Name _____ Title _____ Your Job Title _____ Describe your duties _____ _____ Reason for leaving _____

The N.H.U.H.S.D. is proud to support the principles of Equal Employment Opportunity and does not illegally discriminate against applicants on any basis protected by law.

You may be required to submit proof that you meet the age, medical or security requirements. You will be required to meet employment eligibility requirements under the Immigration Reform and Control Act of 1986 before appointment to any position.

Date _____ Signature: _____