

MONTVERDE ACADEMY

Employment Application



APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Home Phone	Cell Phone	E-mail Address			
Date Available		Alias/Nickname		Are you under 18 years old?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Position Applied for			How long have been at this current address?		
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have any relatives employed here?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, who?		

CRIMINAL HISTORY					
<p>All employees will be subject to both a Florida Criminal History Records check along with a National/FBI Criminal History Records check. For each person to whom this section applies who is hired on or after September 1, 2006, Montverde Academy shall request a criminal records check from state and federal databases. For each person to whom this division applies who is hired prior to September 1, 2006, the employer shall request a criminal records check by a date prescribed by the department of education and shall request a subsequent criminal records check by the fifth day of September every fifth year thereafter.</p>					
Ever been convicted of a crime?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

DRIVING INFORMATION					
Do you have a valid driver's license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, which type?	Class D <input type="checkbox"/>	Class B (CDL) <input type="checkbox"/>
Have you had any accidents in the past three years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you had any moving violations in the past three years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Drivers Number		State issued			
Has your license ever been suspended or revoke?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, reason?		
Some applicants are required to secure a commercial driver license (CDL). Based upon the job description furnished to you, orally or in writing, can you perform the tasks of the job for which you are applying with or without accommodations?					YES <input type="checkbox"/> NO <input type="checkbox"/>

EDUCATION				
High School		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Highest Grade completed
College		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address		
From	To	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

PROFESSIONAL/TEACHING POSITION				
Do you have a teaching certificate?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, in which state(s) are you certified?	
Subject area(s) you certified to teach?			Subject area you prefer to teach?	
Activities you could sponsor/coach?			What salary range are you desiring?	
Are you currently employed?		YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you under contract for next year?	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Number of semester hours in education?		YES <input type="checkbox"/> NO <input type="checkbox"/>	Did you student teach?	
		YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever been discharged from a teaching position?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain:	
Of what professional organizations are you a member?				

REFERENCES (PLEASE LIST THREE PROFESSIONAL REFERENCES)	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

PLEASE LIST CURRENT DEGREES HELD	

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		
List any special training related to the job for which you are applying:		

SUBJECTS OF APPLICANT CONSENT

I voluntarily hereby authorize blood, hair follicle, or urine testing for alcohol and/or drug use and agree to allow such samples and testing to be completed as directed by Montverde Academy as a condition of employment and as part of the pre-employment screening. I hereby authorize the release of any drug/alcohol testing required as part of my pre-employment screening.

I authorize the National Personal Records Center, St. Louis, Missouri, or other custodian of my Military record to release to Montverde Academy or its Agents, information or photocopies from my military personnel records. This could include a photocopy of DD Form 214, report of separation.

Signature

Date

EEOC STATEMENT

Montverde Academy is committed to Equal Employment Opportunity, and compliance with all laws state and federal laws prohibiting discrimination in employment. Montverde Academy's policy is to provide employment, training, compensation, and other conditions or opportunities associated with employment without regard to race, color, religion, gender, national origin, disability status, veteran status, marital status, or any other basis protected by law. Montverde Academy hires, assigns work, promotes, compensates, and retains employees only on the basis of their qualifications and performance, and our business needs.

DISCLAIMER AND SIGNATURE

1. I authorize investigation of all statements contained in this application. I hereby release from all liability or responsibility all persons, companies, or corporations furnishing information about me in connection with my application for employment. I understand that, if employed misrepresentation or omissions on this application shall be considered grounds for dismissal.
2. I understand and agree that my employment, if hired, is for no definite period and I may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.
3. I understand that if I am made a conditional offer of employment, I may be required to pass a medical exam to ensure I can perform the necessary tasks required by the job.
4. In the event of my employment to a position with Montverde Academy, I will comply with all rules and regulations as set forth by Montverde Academy in its policies and oral directions.
5. I understand that the use of narcotics and alcohol is strictly prohibited at Montverde Academy. Anyone who transports or allows to be transported any narcotic or non-prescription drug or who is to be found to be under the influence of narcotics, intoxicants, alcohol or non-prescribed drugs may be immediately discharged. I understand that if Montverde Academy has a reasonable suspicion to believe that I am under the influence of an alcoholic beverage or narcotics and/or non-prescribed drug in the workplace, or if I am involved in a serious accident while in the course of my employment, I may be required to submit to a physical examination and/or drug screening test (hair follicle) to be performed by a licensed facility designated by the Academy. I also understand and agree that refusal to take such a test will result in immediate suspension or discharge of my employment.
6. This information provided by me in completing this Application is true and correct.

I have read in full and understand and agree to the above statements and conditions of employment. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date