HANCOCK PUBLIC SCHOOLS SUPPORT STAFF APPLICATION

Full Name:		Social Security Number:					
Permanent A	ddress:						
Present Add	ress: (if different fro	om above):					
How long do	low long do you expect to live here?Phone Number:Alternate Phone:						
Are you lega	Are you legally eligible to work in the United States? \Box Yes \Box No						
Are you 18 y	ears of age or olde	r?□Yes□	No				
Are you curr	ently retired and co	llecting a Mic	higan school	employee per	ision?	🗌 Yes 🔲 No	
Are you curr	ently employed?	🛛 Yes 🗆 No	lf so,	may we inquir	e of yo	ur present emplo	oyer? 🗆 Yes 🗖 No
IF Yes, Nam	e of Employer:		S	upervisor & Pl	none #:		
Why do you	wish a change of p	osition or loca	ation?				
Have you pr	eviously applied for	a position in	this school d	istrict? 🔲 Yes	5 🗆 N	o When?	
Position(s) f	or which you would	like to apply					
Check grade	levels preferred:	Elementary	y 🔲 Middle	School 🔲	High Sc	hool 🗆 All	Not Applicable
Subjects pre	ferred (if applicable	e):					
When could you start work? Present Salary:Salary Expected:						d:	
If related to	anyone in our empl	loy, other tha	n spouse, sta	ite name and o	departm	nent:	
What furthe	r information would	assist the sc	hool district in	n evaluation of	f your c	andidacy?	
Do you spea	k a second languag	e?		If so	, please	e specify:	
			ACADEMIC	HISTORY			
ТҮРЕ	NAME OF SCHOOL	LOCATION	YEARS ATTENDED	DEGREE OR DIPLOMA	YEAR	MAJOR(S)	MINOR(S)
High		200/11/01		DILOMA	7 = 7 11 (

TYPE	NAME OF SCHOOL	LOCATION	ATTENDED	DIPLOMA	YEAR	MAJOR(S)	MINOR(S)
High							
School							
College or							
University							
College or							
University							
College or							
University							

OTHER TRAINING RECEIVED IN LAST FIVE YEARS

•••••						
NAME OF INSTITUTION	LOCATION	TYPE OF TRAINING				

WORK EXPERIENCE (Include Current Position, if Applicable)

EMPLOYER	LOCATION	POSITION HELD	DATE STARTED	DATE LEFT

US MILITARY SERVICE

BRANCH OF SERVICE	LOCATION	RANK OR POSITION	DATE STARTED	DATE LEFT	

REFERENCES

	NAME	TITLE	COMPANY/ORGANIZATION	ADDRESS	PHONE NUMBER
-					

Have you ever been convicted of a crime? 🔲 Yes 💭 No
If yes, when, where and nature of offense:
Are there any felony charges pending against you? 🔲 Yes 🔲 No
Please specify:
OPTIONAL:
Do you have any medical, mental, or physical conditions which need to be considered should you be employed by this school
district? 🗆 Yes 🔲 No
Please specify:

I authorize investigation of all statements contained in this application, and understand that misrepresentation or omission of facts is cause for dismissal.

Applicant's Signature

Hancock Public Schools Notice of Nondiscrimination

The Board of Education does not discriminate on the basis of race, color, national origin, sex (including sexual orientation and transgender identity), disability, age, religion, height, weight, marital or family status, military status, ancestry, genetic information, or any other legally protected category (collectively, "Protected Classes"), in its programs and activities, including employment opportunities. Questions or concerns regarding the nondiscrimination policies should be directed to Kipp Beaudoin, Superintendent, Hancock Public Schools, 501 Campus Drive, Hancock, MI 49930 (906)487-5925.