



**EDUCATION**

Circle highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12 Post High School 1 2 3 4

School (Name and Address)	Dates Attended	
Secondary:	From _____ To _____	Date Graduated: _____
College:	From _____ To _____	Date Graduated: _____ No. of Credits Completed: _____ Degree: _____
Other Training:	From _____ To _____	Date Graduated: _____

**SPECIAL SKILLS AND QUALIFICATIONS**

Summarize special skills and qualifications acquired from employment and/or experience.

**PERSONAL DATA**

- Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_  
*If YES, please attach explanation (do not include minor traffic violations).*
- Military Service: Date Entered \_\_\_\_\_ Date Separated \_\_\_\_\_ Branch of Service \_\_\_\_\_
- If you are not a U.S. citizen, list type of visa \_\_\_\_\_
- Have you ever been dismissed, asked to resign, or refused employment? Yes \_\_\_\_\_ No \_\_\_\_\_  
*(If YES, please give full details. Please use additional sheets if necessary.)*

**REFERENCES: Please list three persons (other than relatives) who may be contacted to testify concerning appropriate experience, ability or character.**

	FULL NAME	TITLE	COMPLETE ADDRESS	TELEPHONE
1.				
2.				
3.				

I hereby authorize the Christina School District to request verification of statements made by me on this employment application. I also give permission to any of my former employers to release the information requested to the Christina School District. Further I release such employers and the Christina School District from all liability for any damage whatsoever for issuing such information. I certify that all statements made on this application are true and complete to the best of my knowledge and that any false statements or withholding any information could subject me to disqualification or dismissal.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

THIS APPLICATION IS COMPLETE WHEN ALL NECESSARY INFORMATION IS PROVIDED AND WILL BE KEPT ON FILE FOR ONE YEAR.

Return Application to: CHRISTINA SCHOOL DISTRICT  
Eden Support Services Center  
Attn: Child Nutrition Services  
925 Bear Corbitt Road  
Bear, DE 19701  
PH: (302) 454-2022  
FX: (302) 452-1341