



# Wicomico Day School

## APPLICATION FOR EMPLOYMENT

Wicomico Day School receives applications and employees without regard to race, color, sex, religion, age, national origin, disability, marital status, veterans' status, citizenship status, actual or perceived sexual orientation, genetic information or any other characteristic protected by federal, state or local law.

This is a Drug Free Work Environment. Employees and applicants are subject to drug testing and background investigations. Thank you for your interest in career opportunities with Wicomico Day School. This application will remain "active" for six (6) months from today's date. For employment opportunities after this date an updated application should be completed.

### PERSONAL INFORMATION

NAME: \_\_\_\_\_ DATE OF APPLICATION: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
Street City State Zip

CELL OR ALTERNATE PHONE NO: \_\_\_\_\_ E-MAIL ADDRESS, if available: \_\_\_\_\_

Have you ever been employed by Wicomico Day School?  Yes  No If yes, please indicate dates: \_\_\_\_\_

If hired, can you provide documentation of your identify and eligibility for employment in the United States?  Yes  No

*If hired, you will be required to complete an I-9 form.*

### AVAILABILITY

Position applying for: \_\_\_\_\_ Date Available for Work: \_\_\_\_\_ Hours Available for Work: \_\_\_\_\_

Type of employment desired:  Full-Time  Part-Time  Temporary  Seasonal

### MISCELLANEOUS

Have you ever been convicted of a crime (other than a traffic offense)?  Yes  No

Have you ever been arrested for any reason that has not yet been resolved?  Yes  No

If so, when? (Note: A conviction will not necessarily disqualify any applicant.) To help us evaluate your application, please describe the nature of the crime and your subsequent rehabilitation.

### EDUCATION

Schools Attended (include current)	City-State	Did You Graduate	Diploma/Degree
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other		<input type="checkbox"/> Yes <input type="checkbox"/> No	

List additional certifications, licenses, training, skills, qualifications applicable to the position for which you are applying for:

## EMPLOYMENT HISTORY

Please list your employment record, including any periods of unemployment. Begin with your most recent employer. If you were employed under another name, please note that. Attach a resume only to supplement the information below. This application form must be completed in its entirety.

Company Name		Company Address (City, State)		Telephone
Name of Manager	Dates of Employment (month, year)	Compensation		Reason for Leaving
Summary of job duties and responsibilities:				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name		Company Address (City, State)		Telephone
Name of Manager	Dates of Employment (month, year)	Compensation		Reason for Leaving
Summary of job duties and responsibilities:				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Name		Company Address (City, State)		Telephone
Name of Manager	Dates of Employment (month, year)	Compensation		Reason for Leaving
Summary of job duties and responsibilities:				May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

**APPLICANT STATEMENT AND AUTHORIZATION** (Please read carefully before signing)

I certify that all answers given by me are true, accurate and complete. I understand that the falsification, misrepresentation or omission of facts on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

I understand that as part of the selection process, the Company may conduct a routine investigation concerning my employment background, criminal record and education and that continued employment is contingent upon satisfactory results. I also understand that the Company may require the successful completion of a urinalysis for drug testing purposes and/or a blood alcohol test as a condition of employment. By submitting this Application for Employment, I hereby consent to either or both of said tests, at the discretion of the Company.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation. **It is unlawful to require or administer to applicants for employment or prospective employment, or to any employee, a polygraph, lie detector, or similar test as a condition of employment or continued employment. Violation is punishable by criminal and civil penalties.**

I understand that should an employment offer be extended to me and accepted, that I will be an at-will employee and that my employment and compensation may be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or me. I understand that I must adhere to the policies, rules and regulations of employment of the Company. I further understand that no representation, whether oral or written by any representative or agent of the Company can constitute a contract of employment. I understand that the Company shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, benefits, and procedures of other terms or conditions of employment. I acknowledge that I have read and understand the above statements.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_