

**Laurel School District**  
**2497 Harlansburg Road**  
**New Castle, PA 16101**  
**724-658-8940**

<b>Position Desired:</b> (Please circle all positions desired)		
Aide	Custodial/Maintenance	Cafeteria
Secretarial/Clerical	Transportation	

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_

Soc. Sec. No: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**EDUCATION PREPARATION** (Include all formal training programs)

	School Attended	Dates Attended	Dates Graduated	Degrees
Elementary	_____	_____	_____	_____
Secondary	_____	_____	_____	_____
College	_____	_____	_____	_____
Other	_____	_____	_____	_____

**EMPLOYMENT RECORD** (List all work experiences you have had)

Employer	Address	Job Title/Description	Dates of Employment
_____	_____	_____	_____
_____	_____	_____	_____

**PLEASE COMPLETE IF YOU HAVE SERVED IN THE U.S. ARMED SERVICES:**

Branch \_\_\_\_\_ Time of Active Duty \_\_\_\_\_ to \_\_\_\_\_  
 Rank at Discharge \_\_\_\_\_ Date of Final Discharge \_\_\_\_\_  
 Describe duties and special training \_\_\_\_\_

**PERSONAL INFORMATION**

Have you ever been convicted of a felony within the past five years? Yes \_\_\_\_\_ No \_\_\_\_\_

Please **check** below the skills in which you have had training and/or experience and complete any information requested.

<b>AIDE</b>	
<input type="checkbox"/>	Registered Nurse Training
<input type="checkbox"/>	Practical Nurse Training
<input type="checkbox"/>	Assisting physically handicapped children
<input type="checkbox"/>	Previous experience as an aide
<input type="checkbox"/>	Experience with children having handicaps other than physical
<input type="checkbox"/>	Other _____

<b>BUS DRIVER</b>	
<b>Enter your PA Motor Vehicle License #:</b> _____	
<input type="checkbox"/>	Driver of an automobile
<input type="checkbox"/>	Driver of a school bus
<input type="checkbox"/>	Have you ever been convicted of a traffic violation?
<input type="checkbox"/>	Has your operator's license ever been revoked?

<b>BUS MECHANIC</b>	
<b>Enter your PA Motor Vehicle License #:</b> _____	
<input type="checkbox"/>	Pa State Inspection Licenses. If so, list Vehicle Class: _____
<input type="checkbox"/>	Driver of an automobile
<input type="checkbox"/>	Driver of a school bus
<input type="checkbox"/>	Have you ever been convicted of a traffic violation?
<input type="checkbox"/>	Has your operator's license ever been revoked?

<b>CAFETERIA</b>		
<input type="checkbox"/>	Cooking and baking skills	Using a large mixer
<input type="checkbox"/>	Cooking in quantity	Using a steamer
<input type="checkbox"/>	Reading & converting recipes	Using an electric slicer
<input type="checkbox"/>	Reading & converting measurements	Using dishwashers
<input type="checkbox"/>	Using ovens	Cashier skills
<input type="checkbox"/>		

<b>CUSTODIAL/MAINTENANCE</b>		
<input type="checkbox"/>	Electrical	Large Vehicle Driving
<input type="checkbox"/>	Carpentry	Package plant operation
<input type="checkbox"/>	Boiler Maintenance	Lawn equipment
<input type="checkbox"/>	Plumbing	Basic Cleaning
<input type="checkbox"/>	Welding	Other _____
<input type="checkbox"/>	Mechanical	

<b>SECRETARIAL/CLERICAL</b>	
<input type="checkbox"/>	Keyboarding
<input type="checkbox"/>	Telephone Receptionist
<input type="checkbox"/>	Filing
<input type="checkbox"/>	Calculators
<input type="checkbox"/>	Copiers
<input type="checkbox"/>	Bookkeeping
<input type="checkbox"/>	Use of Computers – describe in detail: _____

Would you be willing to serve as a **substitute**? Please circle one: Yes No

Would you be willing to accept **part-time employment**? Please circle one: Yes No

**REFERENCES** (List at least three)

Name	Address	Position	Telephone

**PERSONAL DATA** (Give whatever personal information you wish that might be helpful in the evaluation of your application. Attach additional sheets, if desired)

**PERSONAL INTERVIEW** A personal interview is necessary. Please give best time for you.

Day \_\_\_\_\_ Hour \_\_\_\_\_

**PLEASE NOTE:** This application may be reviewed by Supervisors, Administrators and Board Members.

**NOTE:** Section 1418 of the Pennsylvania School Code requires a pre-employment physical examination and evidence of a tuberculosis test within a one-year period. Before employment, evidence of such examinations and tests must be filed in this office. Forms may be secured in the Superintendent's office. No one may begin work before completing these examinations.

I declare that the information on this application is true and complete to the best of my knowledge and I authorize the investigation of all statements made herein and further authorize any prior employer, educational institutional or persons listed as references to divulge any information requested by Laurel School District and by the signing hereof, do fully release Laurel School District and any persons supplying information to Laurel School District from any liability or damages whatsoever resulting from said disclosures.

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

**LAUREL SCHOOL DISTRICT**

The Laurel School District does not discriminate in its educational programs, activities or employment practices based on race, color, national origin, sex, sexual orientation, disability, age, religion, ancestry, union membership, or any other legally protected category. This policy is in accordance with state law, including the Pennsylvania Human Relations Act, and with federal law, including Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination in Employment Act of 1967 and the Americans with Disabilities Act of 1990. Laurel School District employees and participants who have an inquiry or complaint of harassment or discrimination, or who need information about accommodations for persons with disabilities, should contact Dr. Sandra L. Hennon, Superintendent, at the Laurel District Office, 2497 Harlansburg Road, New Castle, PA, 16101.