



BERKELEY UNIFIED SCHOOL DISTRICT

Office of Human Resources

2020 Bonar Street, Room 206 • Berkeley, CA 94702 • (510) 644-6150

For Office Use Only

Date Tracked: _____

Initials: _____

APPLICATION FOR CLASSIFIED EMPLOYMENT

Print in Ink or Type. Answer all questions completely and accurately.

POSITION APPLIED FOR: _____

Name: _____
Last First Middle

Other names under which you have worked: _____

Address: _____

City, State, Zip: _____

Phone: () () () _____
Home Business Cell E-mail Address

If you are presently employed or were employed in the past by the District, please specify title, location, and supervisor: _____

Can you, upon, hire, submit verification of your legal right to work in the United States? Yes No

Are you eighteen years of age or older? Yes No

Do you have a valid California Drivers License? Yes No

If applying for an entry level classification do you claim Veteran's Preference or Veteran's Disability Preference? (If yes, provide separate documentation.) Yes No

Have you ever been convicted of any criminal offense (felony or misdemeanor) other than minor traffic violations? Yes No

Have you been discharged from a position or released during probation for unsatisfactory service, or have you ever resigned upon request to avoid discharge? (If yes, indicate employer, date and reason below.) Yes No

Do you have relatives who work for the District? (If yes, provide names below.) Yes No

Do you have any physical condition or handicap which might limit your ability to perform the job for which you are applying? (If yes, request and complete a Reasonable Accommodation form available in the Human Resources Office.) Yes No

Supply additional information for any question(s) above. (Use an additional sheet if necessary.)

Name _____
Last First Middle Initial
Position Applied For: _____

Will you accept employment for? (Check all appropriate boxes):

Full Year

School Year

Part Time

Substitute

For all clerical/administrative positions:

Typing speed: _____

Shorthand speed _____

Please list the business machines you can operate: _____

In Case of emergency contact: Name _____

Phone _____ Relationship _____

EMPLOYMENT INFORMATION

FILL IN THIS SECTION COMPLETELY. FAILURE TO DO SO WILL RESULT IN DISQUALIFICATION OF YOUR APPLICATION.
STATEMENTS SUCH AS "SEE RESUME" WILL NOT BE ACCEPTED IN LIEU OF COMPLETION.

Begin with your present employment and work back. Account for all time during the last ten (10) years, including periods of unemployment. In addition, please describe any other related work experience. (Use additional sheets if more space is required.)
If you have not worked in the last ten years, list your qualifying experience before that time.

PRESENT OR LAST POSITION	Employer : _____	From: _____ Month Year
	Address: _____	To: _____ Month Year
	City _____ State _____ Zip _____	Total: _____ Years Months
	Position Title: _____	Full Time: <input type="checkbox"/>
	Duties: _____	Part Time <input type="checkbox"/> hrs/wk _____
	Supervisor's Name & Title _____	Last Salary: _____
	Phone No. _____	Reason For leaving: _____

Employer : _____	From: _____ Month Year
Address: _____	To: _____ Month Year
City: _____ State _____ Zip _____	Total: _____ Years Months
Position Title: _____	Full Time: <input type="checkbox"/>
Duties: _____	Part Time <input type="checkbox"/> hrs/wk _____
Supervisor's Name & Title _____	Last Salary: _____
Phone No. _____	Reason For leaving: _____

Employer : _____	From: _____ Month Year
Address: _____	To: _____ Month Year
City: _____ State _____ Zip _____	Total: _____ Years Months
Position Title: _____	Full Time: <input type="checkbox"/>
Duties: _____	Part Time <input type="checkbox"/> hrs/wk _____
Supervisor's Name & Title _____	Last Salary: _____
Phone No. _____	Reason For leaving: _____

EMPLOYMENT INFORMATION (CONTINUED)

<i>Employer :</i> _____ <i>Address:</i> _____ <i>City:</i> _____ <i>State</i> _____ <i>Zip</i> _____ <i>Position Title:</i> _____ <i>Duties:</i> _____ _____ <i>Supervisor's Name & Title</i> _____ <i>Phone No.</i> _____	<i>From:</i> _____ <i>Month</i> <i>Year</i> <i>To:</i> _____ <i>Month</i> <i>Year</i> <i>Total:</i> _____ <i>Years</i> <i>Months</i> <i>Full Time:</i> <input type="checkbox"/> <i>Part Time</i> <input type="checkbox"/> <i>hrs/wk</i> <i>Last Salary:</i> _____ <i>Reason For leaving:</i> _____ _____ _____
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<i>Employer :</i> _____ <i>Address:</i> _____ <i>City:</i> _____ <i>State</i> _____ <i>Zip</i> _____ <i>Position Title:</i> _____ <i>Duties:</i> _____ _____ <i>Supervisor's Name & Title</i> _____ <i>Phone No.</i> _____	<i>From:</i> _____ <i>Month</i> <i>Year</i> <i>To:</i> _____ <i>Month</i> <i>Year</i> <i>Total:</i> _____ <i>Years</i> <i>Months</i> <i>Full Time:</i> <input type="checkbox"/> <i>Part Time</i> <input type="checkbox"/> <i>hrs/wk</i> <i>Last Salary:</i> _____ <i>Reason For leaving:</i> _____ _____ _____
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<i>Employer :</i> _____ <i>Address:</i> _____ <i>City:</i> _____ <i>State</i> _____ <i>Zip</i> _____ <i>Position Title:</i> _____ <i>Duties:</i> _____ _____ <i>Supervisor's Name & Title</i> _____ <i>Phone No.</i> _____	<i>From:</i> _____ <i>Month</i> <i>Year</i> <i>To:</i> _____ <i>Month</i> <i>Year</i> <i>Total:</i> _____ <i>Years</i> <i>Months</i> <i>Full Time:</i> <input type="checkbox"/> <i>Part Time</i> <input type="checkbox"/> <i>hrs/wk</i> <i>Last Salary:</i> _____ <i>Reason For leaving:</i> _____ _____ _____
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<i>Employer :</i> _____ <i>Address:</i> _____ <i>City:</i> _____ <i>State</i> _____ <i>Zip</i> _____ <i>Position Title:</i> _____ <i>Duties:</i> _____ _____ <i>Supervisor's Name & Title</i> _____ <i>Phone No.</i> _____	<i>From:</i> _____ <i>Month</i> <i>Year</i> <i>To:</i> _____ <i>Month</i> <i>Year</i> <i>Total:</i> _____ <i>Years</i> <i>Months</i> <i>Full Time:</i> <input type="checkbox"/> <i>Part Time</i> <input type="checkbox"/> <i>hrs/wk</i> <i>Last Salary:</i> _____ <i>Reason For leaving:</i> _____ _____ _____
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Do you have fluency in languages other than English?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Language(s) _____	Read? _____	Write? _____ Speak? _____
_____	Read? _____	Write? _____ Speak? _____

EDUCATIONAL RECORD

Circle highest grade completed: 6 7 8 9 10 11 12 13 14 beyond

Name and location of Junior High or High School last attended:

Did you graduate from High School? Yes No

College Attended (Name & Location)	Dates Attended	Major	Credits or Degree
_____	_____	_____	_____
_____	_____	_____	_____

Other Specialized Training, provide information.

PROFESSIONAL REFERENCES

List three people who can vouch for your character and ability. Please include former employers and supervisors.

NAME	ADDRESS	PHONE NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

The Berkeley Unified School District does not discriminate on the basis of race, color, religion, gender, marital status, ancestry, political affiliation, age, sexual orientation, disability, medical condition, national origin, or mental or physical handicap in any of its policies or procedures related to admissions, employment, educational services, programs or activities.

Read Carefully Before Signing

I authorize the investigation of all statements contained in this application and certify that the information I have provided is true and correct. I understand that misrepresentation or omission of facts is cause for immediate dismissal and/or non-consideration for a position with Berkeley Unified School District.

I release from liability persons and organizations reporting information pursuant to an investigation of my statements provided in this application, and I waive any right of access to such information. I release Berkeley Unified School District and its agents from any liability in connection with the use of information provided in said investigation.

I agree to be fingerprinted prior to hire, to submit to a completed medical examination if requested as pertinent to this position, to sign an oath of allegiance as required by law, and upon employment, to furnish such proof of age and eligibility to work in the United States as may be required.

Signature of Applicant Date

EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER