HORATIO SCHOOL DISTRICT

NON-CERTIFIED EMPLOYMENT APPLICATION 204 Lawson Lane PO Box 435 Horatio AR 71842



Name:	
Address:	
City/State/Zip:	
Phone number:	
Cell Phone Number:	
Job Position Applying for:	
Do you hold a current drivers license? ☐yes ☐no	
Are you willing to work any shift? □yes □no	
Are you able to perform the essential functions of the journe seeking? \Box yes \Box no	ob position you
List any skills that may be useful for the job you are seel	king:
Employment History:	
1. Employer Name:	Date of employment:
Supervisor Name:	
Address:	
City/State/Zip:	
Job Duties:	
Reason for Leaving:	

2. Employer Name:	Date of employment:
Supervisor Name:	
Address:	
City/State/Zip:	
Job Duties:	
Reason for Leaving:	
Education and Training:	
(College/Technical, Vocational) N	lame and Address:
High School/GED Name and Addr	ress:
	al licenses or certifications that you hold:
	es who would be willing to provide a reference for you)
Name:	Address:
City/State/Zip:	Telephone:
Name:	Address:
City/State/Zip:	Telephone:
Please provide any other informa	ation you believe should be considered
I do hereby certify that all statem the best of my knowledge.	nents made by me in this application are true and correct to
Signature	Date

It is the policy of Horatio School District to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as a race, color, religion, gender, national origin, age, disability or veteran status.