



ASHDOWN PUBLIC SCHOOLS

751 Rankin Street
Ashdown, Arkansas
Administration Phone (870) 898-3208
Fax (870) 898-3709



CLASSIFIED PERSONNEL APPLICATION

The Ashdown School District does not discriminate in employment on the basis of race, color, sex, national origin, or handicap.

Name: Last First Middle Maiden

Present Address

City State Zip Code Phone

Permanent Address

City State Zip Code Phone

Social Security Number

U.S. Citizen Yes No Green Card Number

IN CASE OF AN EMERGENCY NOTIFY

Name Address
Phone

POSITION DESIRED

Please indicate the positions in which you are interested: Secretarial, Attendance Clerk,
*Teacher's Aide, Food Service, Maintenance, Custodian, or Bus Driver

*60 college hours, associate degree or pass Para-Professional Assessment as required by ADE

First Choice

Second Choice

Third Choice

Please Return to:
Ashdown Public Schools
751 Rankin Street
Ashdown, AR 71822

Date Interviewed

Interviewed By

Educational and Professional Training

High School: _____ Address: _____
From: _____ To: _____ Did you graduate? ☐ YES ☐ NO Degree: _____
College: _____ Address: _____
From: _____ To: _____ Did you graduate? ☐ YES ☐ NO Degree: _____
Other: _____ Address: _____

Professional Certification (if applicable to position desired)

State of Issuance	Area of Certification	Date Issued and Expires	Type of License

Work Experience

Name of Employer	Length of Employment	Date	Phone Number	Type of Work

****Bus Driver Applicants Only**

Current Driver License Class D CDL Other

Issuing State: _____ Driver License Number: _____

Have you had any type of vehicle accident in the last 3 years? YES: _____ NO _____

If yes, give approximate dates: _____

Has your driver license ever been suspended or revoked? YES _____ NO _____

If yes, give reason and approximate dates: _____

Do you have any physical impairment? _____

List the last three (3) businesses you were employed to drive:

Business

Years Worked

Phone Number

References

List three (3) references other than relatives:

Full Name Of Reference

Mailing Address

Phone

Occupation

General Information

Have you ever been convicted of a felony or a misdemeanor offense? YES _____ NO _____

If yes, When: _____ Where: _____ Nature of Offense: _____

Have you ever been investigated for, been charged with or found guilty of child abuse by a governmental agency? YES _____ NO _____

If yes, state the date, city & state, and charge: _____

**If this was/is a school corporal punishment situation be sure to include a description and references with telephone numbers of persons who can absolutely vouch that you were maliciously charged.

Veteran Information (please indicate if any of the following apply to you)

Veteran who was honorably discharged from a tour of active duty? _____ Yes _____ No

Veteran without a service-connected disability? _____ Yes _____ No

Veteran with a service-connected disability? _____ Yes _____ No

Spouse of a deceased veteran who is unmarried through-out the hiring process? _____ Yes _____ No

Veteran who has served at least 6 years in the National Guard or reserve forces of the United States? _____ Yes _____ No

Additional Required Paperwork to complete application:

If a Veteran also include (*as applicable* to veteran category selected on employment application):

*Form DD-214 indicating honorable discharge

*Letter dated within the last six months from the applicant's command indicating years of service in the National Guard or Reserve Forces as well as applicant's current status

*Marriage License

*Death Certificate

*Disability letter from the Veteran's Administration (if a service-connected disability)

READ CAREFULLY BEFORE SIGNING

Application forms are sent to all who request them regardless of existing vacancies. The issuance of such forms does not signify that the applicant is under consideration for appointment. The facts set forth in my application for employment shall be considered true and complete. You are hereby authorized to make any investigation of my references and release the said District and my former employers who may supply written and/or oral references from this and all liability resulting from such investigation. If employed, I understand that false statements on this application shall be considered sufficient cause for dismissal, and I agree to follow all rules, regulations, and policies of the Ashdown School District as well as all Arkansas and Federal laws applicable to my employment.

Signed: _____

Date: _____