



# Pikeville Independent Schools

148 Second Street  
Pikeville, Kentucky 41501  
Telephone (606) 432-8161  
Fax (606) 432-2119

## CLASSIFIED APPLICATION FOR EMPLOYMENT

### PERSONAL DATA:

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone: ( ) \_\_\_\_\_

Check the following position(s) desired:

Date you can begin work here: \_\_\_\_\_

- Bus Driver                       Custodian                       Food Service                       Maintenance
- Paraprofessional                       Substitute                       Other/Please Specify

Are you presently employed? \_\_\_\_\_

May we inquire your present employer? \_\_\_\_\_

If related to anyone in our employment, state their name and relationship: \_\_\_\_\_

### EDUCATION:

Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12

College: 1 2 3 4

A COPY OF THE CERTIFICATE CHECKED ABOVE MUST ACCOMPANY THIS APPLICATION.

Skills: \_\_\_\_\_

Special Training: \_\_\_\_\_

### PREVIOUS WORK EXPERIENCE:

TYPE OF WORK	FIRM OR INSTITUTION	ADDRESS & TELEPHONE	DATES

GIVE THREE REFERENCES NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR AND YEARS ACQUAINTED:

NAME	ADDRESS	TELEPHONE	YEARS ACQUAINTED

Are you related to any member of the Pikeville Independent School Board of Education? Yes \_\_\_ No \_\_\_

**APPLICANT'S AUTHORIZATION TO RELEASE INFORMATION:**

I certify, that the information given in this application is correct and complete to the best of my knowledge. I am aware that, should investigation at any time show any falsification, I will not be considered for employment, or if employed, I will be dismissed and disqualified from future employment. I hereby authorize the Pikeville Independent Board of Education to make all necessary investigations concerning me, my work, habits, character, or my action in any transaction. I authorize the Pikeville Independent Board of Education to receive and make available to other interested schools my records, and further authorize and request each former employer, person given as a reference, educational institution, or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\*NOTE: "For this type of employment, state law requires a state criminal history background check as a condition of employment. Under certain circumstances, a national criminal history background check may be required as a condition of employment."

\*NONDISCRIMINATION POLICY: It is the policy of the Pikeville Independent Board of Education that no person be subjected to discrimination on the basis of race, color, national origin, religion, sex, age, marital status, or handicap in employment or in any admission or access to or treatment in any of its programs and activities. The Pikeville Independent Board of Education will comply with Title IX, Title VI, Section 504, and all other requirements of state and federal laws concerning nondiscrimination.

EQUAL OPPORTUNITY EDUCATIONAL INSTITUTION