

**SAN DIEGUITO UNION HIGH SCHOOL DISTRICT  
PERSONNEL COMMISSION  
710 Encinitas Blvd., Encinitas, CA. 92024  
APPLICATION FOR CLASSIFIED EMPLOYMENT**

FOR OFFICIAL USE ONLY

**INSTRUCTIONS:** Read carefully. This application is part of your total evaluation. It is in your best interest to read the job announcement and to make a complete and up-to-date statement of your personal history and qualifications. False statements or answers may be cause for rejection or termination after employment. Please use a typewriter or print in ink. **FILL OUT ONE APPLICATION FOR EACH DIFFERENT POSITION (JOB TITLE) FOR YOU ARE APPLYING.**

POSITION Applied for:\* \_\_\_\_\_ Email Address: \_\_\_\_\_

NAME: LAST \_\_\_\_\_ FIRST: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

ADDRESS: Number – Street – Apt. No. \_\_\_\_\_ Home Telephone: \_\_\_\_\_ Business or Message Phone: \_\_\_\_\_  
Area Number \_\_\_\_\_ Area Number \_\_\_\_\_ ext. \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

**EDUCATION:** Circle highest grade completed: 6 7 8 9 10 11 12  
Graduated: \_\_\_\_ yes; \_\_\_\_ no; \_\_\_\_ GED Course of study in High School: \_\_\_\_\_

Name and Location of Colleges, trade or other schools attended:	Dates attended:	Credits Completed	Major subject or course	Degree/ Certificate

**CLERICAL/SECRETARIAL APPLICANTS ONLY:**  
Typing speed \_\_\_\_ wpm: shorthand speed \_\_\_\_ wpm  
Experience: \_\_\_\_ calculator: \_\_\_\_ computer  
\_\_\_\_ word processing: \_\_\_\_ other \_\_\_\_\_

**I am available for (check all that apply)**  
\_\_\_\_ Full time employment  
\_\_\_\_ Part time employment  
\_\_\_\_ Temporary employment

Have you ever been employed by this District? \_\_\_\_ yes \_\_\_\_ no; Dates: \_\_\_\_\_  
Title: \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Are you now or have you ever been a member of the Public Employees' Retirement System?  
\_\_\_\_ yes; \_\_\_\_ no; Dates: \_\_\_\_\_

Are there any restrictions to your being able to accept employment in this District? \_\_\_\_\_

List CA Driver's License or other licenses/certificates if required on job announcement: \_\_\_\_\_

Complete this section if language in addition to English is required in the job announcement.  
Language(s) \_\_\_\_\_ Speak \_\_\_\_\_ Read \_\_\_\_\_ Write \_\_\_\_\_

Do you wish to claim veteran's points under Section 13735 of the Education Code? \_\_\_\_ yes; \_\_\_\_ no.  
If so, you must present form DD214 prior to completion of the examination process.

What written proof of legal residence can you submit to show that you are entitled to work in the U.S.?  
\_\_\_\_ Social Security Card; \_\_\_\_ Drivers License; \_\_\_\_ Birth Certificate; \_\_\_\_ Passport; \_\_\_\_ Other.

**AFTER AN OFFICIAL OFFER OF EMPLOYMENT HAS BEEN MADE, YOU WILL BE REQUIRED TO:**

- 1) Take an oath of Affirmation of Allegiance.
- 2) Obtain a negative T.B. examination
- 3) Be fingerprinted.\*
- 4) Provide proof of your right to legally work in this country.
- 5) Have a physical examination at district expense.

*Employment is contingent upon results of a post-offer medical examination which includes a drug and alcohol screen.*

Experience (Reference to resume or other forms will not be accepted in place of completing this application). Read the employment standards in the job announcement before completing this section. Begin with your most recent job. List all jobs, and periods of unemployment, in the last ten years. Include military service and volunteer experience which relate to the job for which you are applying. List the payroll title(s) and duties for each separate job. Attach additional sheets if necessary.

Name of present employer:		Phone Number:	Your title:
Address:		Your duties:	
Dates:	Pay Rate: \$ _____ check one: <input type="checkbox"/> hourly <input type="checkbox"/> weekly <input type="checkbox"/> monthly		
Supervisor's name and title:		Reason for leaving:	
Name of previous employer:		Phone Number:	Your title:
Address:		Your duties:	
Dates:	Pay Rate: \$ _____ check one: <input type="checkbox"/> hourly <input type="checkbox"/> weekly <input type="checkbox"/> monthly		
Supervisor's name and title:		Reason for leaving:	
Name of previous employer:		Phone Number:	Your title:
Address:		Your duties:	
Dates:	Pay Rate: \$ _____ check one: <input type="checkbox"/> hourly <input type="checkbox"/> weekly <input type="checkbox"/> monthly		
Supervisor's name and title:		Reason for leaving:	
Name of previous employer:		Phone Number:	Your title:
Address:		Your duties:	
Dates:	Pay Rate: \$ _____ check one: <input type="checkbox"/> hourly <input type="checkbox"/> weekly <input type="checkbox"/> monthly		
Supervisor's name and title:		Reason for leaving:	
<b>REFERENCES:</b> Please list three supervisors whom we may contact that have knowledge of your work:			
Name		Title	Organization
Address		Phone number	
Name		Title	Organization
Address		Phone number	
Name		Title	Organization
Address		Phone number	

I understand that any false or misleading information omitted from the application form may be cause for rejection of application and/or removal from employment. I authorize my present and previous employers to release information regarding my work history.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date