



APPLICATION FOR EMPLOYMENT

Thank you for your interest in Child Jesus of Prague School. To assist us in reviewing your application, please complete all section of the application form.

PERSONAL INFORMATION

NAME _____		LAST NAME _____		GIVEN NAME _____		MIDDLE NAME _____		NICK NAME _____	
ADDRESS _____									
CITY _____			PROVINCE _____			ZIP CODE _____			
EMAIL ADDRESS _____					HOME PHONE No. _____		CELL PHONE No. _____		
DATE OF BIRTH		<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>
		MONTH		DAY		YEAR			
AGE _____		GENDER _____		MARITAL STATUS _____		RELIGION _____			

EDUCATIONAL ATTAINMENT

NAME OF SCHOOL	SCHOOL LOCATION	YEAR ATTENDED		DATE GRADUATED	DIPLOMA/DEGREE EARNED
		FROM	TO		

WORK EXPERIENCE

NAME OF INSTITUTION	ADDRESS	POSITION HELD	PERIOD OF SERVICE		REASON FOR LEAVING
			FROM	TO	

CURRENT EMPLOYMENT

NAME OF EMPLOYER			ADDRESS		
POSITION / TITLE			LEVEL		
STATUS	FULL-TIME <input type="checkbox"/>	PART-TIME <input type="checkbox"/>	TEMPORARY <input type="checkbox"/>		
CURRENT SALARY			DESIRED SALARY		

ADDITIONAL INFORMATION

Please indicate your sector preference: PRE-SCHOOL PRIMARY SECONDARY

REFERENCES: Please provide at least two (2). If you are currently employed, please include your direct supervisor as one of your references. By providing these information you are giving us your consent to contact them.

1) _____	2) _____
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CERTIFICATION: I certify that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatement of fact, I am subject to disqualification for employment and dismissal. All statements made on this application, including employment information, are subject to verification as a condition of employment and I authorize Child Jesus of Prague School to investigate any of the information given.

SIGNED: _____ DATE: _____