

**AUGUSTA PUBLIC SCHOOLS  
CLASSIFIED EMPLOYMENT APPLICATION**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

NOTIFY IN CASE OF EMERGENCY (name, address, phone#) \_\_\_\_\_  
\_\_\_\_\_

POSITION FOR WHICH APPLYING \_\_\_\_\_

DO YOU HAVE A HIGH SCHOOL DIPLOMA OR A GED? \_\_\_\_\_

ADDITIONAL EDUCATION \_\_\_\_\_

WORK OR MILITARY EXPERIENCE

NAME OF EMPLOYER      POSITION HELD      DATES WORKED

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REFERENCES

NAME      ADDRESS      TELEPHONE #

\_\_\_\_\_  
\_\_\_\_\_

Are you an active or reserve member of a branch of the United States Armed Services?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes please note the branch of service: \_\_\_\_\_

Do you reside in a household with an active or reserve member of a branch of the United States Armed Services? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes please note the branch of service and the person's name relationship to you.: \_\_\_\_\_

Are you a surviving spouse of a deceased member of the United States Armed Services?  
Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes please note the branch of service: \_\_\_\_\_

**DO YOU HAVE CHARGES PENDING OR HAVE YOU BEEN CONVICTED OF A FELONY?** \_\_\_\_\_

I certify that all information set forth in this application is true and if employed falsified statements on this application shall be considered sufficient cause for dismissal. You are authorized to investigate my personal history and employment record including my present employer.

It is the policy of the Augusta School District to recruit, hire, and promote persons in all job classifications without regard to race, color, religion, sex, national origin, age, or handicap.

**SIGNATURE** \_\_\_\_\_