



CLASSIFIED EMPLOYMENT APPLICATION

Position Applying for: _____

Date of Application: _____ Date Available: _____

Personal History

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

Have you previously been employed by CCALL?

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 If yes, list month and year: _____
Y N

How did you learn about this open position? _____

Educational Record

Your highest level of education completed:

High School				College					
9	10	11	12	1	2	3	4	5	Clear

Principal field of study: _____

Business or trade school: _____

Have you completed a CPR/First Aid course?

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 If yes, date completed: _____ Hours Completed: _____
Y N

Employment History

Please list your last four employers, beginning with the most current

Dates: Month/Year	Name, Address, Phone	Salary	Position and Brief Description of Duties	Reason for Leaving

May we contact your present employer?
Y N

If applicable to the position you're applying for, indicate your experience which would be of value for the position:

Have you ever been convicted of a felony? If yes, please explain below:
Y N

I understand that acceptance of an employment offer does not create Cornerstone Christian Academy for Learning and Leadership's (CCALL) contractual obligation to continue to employ me in the future. I hereby authorize CCALL to inquire about my experience and record with former employers with no liability arising therefrom.

I hereby certify the information in this application for employment is correct and complete to the best of my knowledge. If employed, any misstatement or omission of fact may result in my dismissal.

Signature

Date



Applicant Professional References

First Name:		Last Name:	
Title:		Relationship:	
Address:		City, State & Zip	
Email:		Phone:	

First Name:		Last Name:	
Title:		Relationship:	
Address:		City, State & Zip	
Email:		Phone:	

First Name:		Last Name:	
Title:		Relationship:	
Address:		City, State & Zip	
Email:		Phone:	

First Name:		Last Name:	
Title:		Relationship:	
Address:		City, State & Zip	
Email:		Phone:	

Date: _____

Applicant's Printed Name: _____

Applicant's Signature: _____