



ESCONDIDO CHARTER SCHOOL DISTRICT

Main Office:
1868 East Valley Parkway
Escondido, CA 92027
(760) 737-3154 Voice
(760) 738-8996 FAX
www.echs.org

AN EQUAL OPPORTUNITY EMPLOYER*

APPLICATION FOR EMPLOYMENT

Check appropriate box below

Escondido Charter High School

Heritage K-8 Charter School

Last Name:

First Name:

MI:

Street Address: sdf

City:

Zip:

Daytime Telephone:

Evening Telephone:

What position are you applying for?

What type of employment are you seeking?

Full

Part

Date available for employment?

If hired, can you furnish proof you are eligible to work in the U.S.?

Yes

No

Have you ever been convicted of a felony or misdemeanor?

Yes

No

If yes, describe below all incidents except minor traffic violations (a yes does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying will be considered.)

FOR OFFICE USE ONLY

ALL APPLICANTS WILL BE SUBJECT TO A BACKGROUND INVESTIGATION AND DRUG SCREEN PRIOR TO EMPLOYMENT

*Escondido Charter School District does not discriminate on the basis of race, religion, color, gender, sex, age, national origin or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

EDUCATION AND TRAINING

High School:

College or University:

Trade School:

Bachelor's Degree:

Master's Degree:

What is your current credential(s)?

Expires:

Do you have any of the following certifications?

CLAD

BCLAD

What language(s) do you speak fluently?

Co-curricular experience or interest?

EXPERIENCE

Please list names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Employer:	Position:
Address:	Phone:
Duties:	
From: _____ To: _____	Salary: \$ _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly
Employer:	Position:
Address:	Phone:
Duties:	
From: _____ To: _____	Salary: \$ _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly
Employer:	Position:
Address:	Phone:
Duties:	
From: _____ To: _____	Salary: \$ _____ <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly

Employer:		Position:			
Address:		Phone:			
Duties:					
From:	To:	Salary: \$	<input type="checkbox"/> Hourly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Yearly

REFERENCES

Please list three references including their name, address, phone number, and title.

1:

2:

3:

AUTHORIZATION TO RELEASE INFORMATION

It is the policy of Escondido Charter School District to conduct reference checks for all candidates for employment. Reference checking is conducted following the interview portion of the selection procedure and prior to offer of employment.

Your signature below indicates your agreement and acknowledgment of the following:

- 1: As an applicant for employment with Escondido Charter School District, I authorize my current and past employers and work associates, including but not limited to, supervisors, colleagues and subordinates, to release to Escondido Charter School District any reference information in my personnel records or file (e.g. applications for employment, time and sick leave records, vacation records, performance evaluations), academic records (e.g. transcripts, certificates, credentials, etc) and information related to my work-related personal characteristics (e.g. my character, dependability, honesty, integrity, ability to work under pressure, interpersonal skills, general physical ability, and reputation among co-workers)
- 2: I expressly and without reservation waive my right to review the information collected in the reference checks.
- 3: Escondido Charter School District will maintain reference information in strictest confidence and solely for the purpose of the recruitment for which I have applied, and information obtained during reference checks will not be provided to anyone outside the selection process.
- 4: A photocopy or fax of this signed Authorization is to be considered valid as an original.
- 5: IN EXECUTING THIS AUTHORIZATION, I FULLY AND COMPLETELY RELEASE ALL PRESENT AND PAST EMPLOYERS AND THEIR EMPLOYEES, ESCONDIDO CHARTER SCHOOL DISTRICT AND ITS EMPLOYEES, AND ALL OTHER PERSONS AND ENTITIES FROM LIABILITY FOR ANY DAMAGE, INCLUDING, TO THE FULL EXTENT ALLOWED BY LAW, LIABILITY UNDER CALIFORNIA CIVIL CODE SECTIONS 45 AND 46 AND CALIFORNIA LABOR CODE SECTION 1054, OR ANY SIMILAR LAWS OF OTHER STATES OR POLITICAL ENTITIES, WHICH MAY RESULT FROM FURNISHING INFORMATION WHICH I AM PERMITTING TO BE RELEASED BY WAY OF THIS AUTHORIZATION.
- 6: I HAVE CAREFULLY READ AND UNDERSTAND ALL OF THE PROVISIONS OF THIS AUTHORIZATION, AND HAVE VOLUNTARILY AND WITHOUT COERCION OR DURESS AGREED TO AND SIGNED THIS AUTHORIZATION.

I also understand that any false or misleading information given on this application may be cause for rejection of my application and/or removal from employment. The information given is true and complete to the best of my knowledge.

Print Full Name:

Other Names:

Signature:

Date: