
CHESTER COUNTY INTERMEDIATE UNIT

Application for Employment Project, Technical, Specialist and Service Personnel

Applicant

Position



1. PERSONAL DATA (Type or print in ink)

Name _____
Last First Middle Social Security Number

Present Address _____
Street Address

City State Zip Code

Telephone Number

Permanent Address _____
Street Address

City State Zip Code

Telephone Number

2. EDUCATIONAL BACKGROUND

Circle Highest Grade Completed: Elementary / Secondary College
1 2 3 4 5 6 / 7 8 9 10 11 12 1 2 3 4

High School:

Name and Address Major/Minor Diplomas/Degrees or Credits Earned GPA

College/University:

Name and Address Major/Minor Diplomas/Degrees or Credits Earned GPA

College/University:

Name and Address Major/Minor Diplomas/Degrees or Credits Earned GPA

Graduate Study:

Name and Address Major/Minor Diplomas/Degrees or Credits Earned GPA

Other:

Name and Address Major/Minor Diplomas/Degrees or Credits Earned GPA

3. WORK EXPERIENCE (List present or most recent experience first)

Date of Employment: _____
From To Position/Title

Name of Employer: _____

Address (street/city/state/zip): _____

Phone Number (including area code): _____

Name and Title of Supervisor: _____

Type of Work Performed: _____

Final Yearly Salary/Hourly Rate: _____

Reason for Leaving: _____

Date of Employment: _____
From To Position/Title

Name of Employer: _____

Address (street/city/state/zip): _____

Phone Number (including area code): _____

Name and Title of Supervisor: _____

Type of Work Performed: _____

Final Yearly Salary/Hourly Rate: _____

Reason for Leaving: _____

Date of Employment: _____
From To Position/Title

Name of Employer: _____

Address (street/city/state/zip): _____

Phone Number (including area code): _____

Name and Title of Supervisor: _____

Type of Work Performed: _____

Final Yearly Salary/Hourly Rate: _____

Reason for Leaving: _____

Date of Employment: _____
From To Position/Title

Name of Employer: _____

Address (street/city/state/zip): _____

Phone Number (including area code): _____

Name and Title of Supervisor: _____

Type of Work Performed: _____

Final Yearly Salary/Hourly Rate: _____

Reason for Leaving: _____

4. REFERENCES

References should include previous supervisors who have firsthand knowledge of your professional competence and your personal qualifications. If any person(s) listed should not be contacted for reference at the present time, indicate in the left-hand margin the date contact(s) may be made.

Name: _____

Position/Relationship to You: _____

Address (street/city/state/zip): _____

Telephone: _____

Name: _____

Position/Relationship to You: _____

Address (street/city/state/zip): _____

Telephone: _____

Name: _____

Position/Relationship to You: _____

Address (street/city/state/zip): _____

Telephone: _____

Name: _____

Position/Relationship to You: _____

Address (street/city/state/zip): _____

Telephone: _____

5. GENERAL INFORMATION (Please circle your answers)

1. Have you ever been convicted of a criminal offense? Yes No
2. Have you ever been fired from any job for any reason? Yes No
3. Have you ever quit a job after being notified that you would be fired? Yes No
4. To your knowledge are you related to any current employee of the CCIU? Yes No

If yes, please state the name of the individual: _____

What is your relationship to him/her? _____

5. Are you a U.S. citizen, U.S. national, lawful permanent resident, lawful temporary resident, asylee, or refugee? Yes No
(The term "Lawful Temporary Resident" refers to aliens granted temporary resident status under amnesty programs, not to aliens holding short-term visas such as the H-1B, J, or F.)

If "YES", do not answer question 6.

If "NO", please answer question 6.

6. a) What is your current immigration status?

b) When does this status expire? _____
Month / Day / Year

c) Do you have an Employment Authorization Document? Yes No

If "YES", when does it expire? _____
Month / Day / Year

*** CLEARANCES ***

ACT 34 COMPLIANCE

(Background Check of Prospective Employees)

Each Pennsylvania resident must submit with his/her employment application, a copy of a report of Criminal History Record Information from the Pennsylvania State Police or a statement from the Pennsylvania State Police that the State Police Central Repository contains no such information relating to that person. Each out-of-state applicant must submit with his/her application for employment a copy of a federal criminal record history from the Federal Bureau of Investigation. The criminal record history report must be no more than one (1) year old. The applicant **MUST** submit the **ORIGINAL** report prior to employment.

ACT 151

(PA Child Abuse History Clearance)

Each candidate must submit with his/her employment application a copy of an official clearance statement obtained from the Pennsylvania Department of Public Welfare or a statement from the Department of Public Welfare that no record exists. The clearance statement must be no more than one (1) year old. The applicant **MUST** submit the **ORIGINAL** report prior to employment.

AGREEMENT

I certify that the facts set forth in my application are true and complete to the best of my knowledge and belief, and are made in good faith. I understand that any misrepresentation of information shall be sufficient cause for: 1) Rejecting my candidacy, 2) Withdrawing of any offer of employment, 3) Terminating my employment. In addition, I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and to respond fully and completely to all questions that officials of Chester County Intermediate Unit may ask regarding my prior work history and performance. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to this school district. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and release from liability all persons and/or entities supplying information regarding my background. However, I do not authorize inquiries which would include information related to any medical condition or medical history. Further, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by the school district or by entities or persons providing such information to the school district, including any and all claims concerning allegations of employment discrimination because of race, color, sex, religion, national origin, ancestry, age or disability.

**Completed applications
should be returned to:**

Human Resources
Chester County Intermediate Unit
Educational Service Center
455 Boot Road, Downingtown, PA 19335
(484) 237-5085