

OFFICE USE
Interview Schedule

CLARENDON SCHOOL DISTRICT TWO

P.O. BOX 1252, MANNING, SC 29102
803-435-4435 Office
803-435-8172 Fax

SLED Check _____ Date _____
Interviewed: _____ Date _____
By: _____

Date: _____
Time: _____
Date: _____
Time: _____

APPLICATION FOR EMPLOYMENT
NON-CERTIFIED PERSONNEL

(PLEASE PRINT)

NOTE: All persons applying for full-time employment in any area of service that is related to the instruction of students must have: 1. a two-year degree in approved areas of study; or
2. two years of college (60 semester hours) in an approved area of study; or
3. evidence of having passed a test of content knowledge and pedagogy through the National Educational Testing Service

NAME: Last First Middle Maiden Name

Any Former Names used Social Security Number Date of Birth (optional) Sex

Address: City State Zip Code

Home Telephone Number (including area code) Cell Number (if applicable) Alternate Number

Are you Presently Employed? ___ yes ___ no If yes, where? _____

What is your present position? _____ Reason for leaving: _____

POSITION DESIRED

List your area(s) of interest and qualifications: i.e. Aide, Secretarial/Clerical, Food Service, Maintenance, Custodial, Substitute:

Area of Interest	Qualifications

Have you ever been convicted of a crime? ___ Yes ___ No If so, please explain: _____

Have you ever been released from employment? ___ Yes ___ No If yes, please explain: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

Prior Employment

Employer

City

Supervisor
Worked

Type of Work

Dates

EDUCATIONAL TRAINING

	Institution Attended and Location	Major	Did you Graduate?	Degree	Date
High School					
Business/Trade/Technical					
College					
Graduate					

REFERENCES

	NAME	POSITION	ADDRESS	TELEPHONE
1.				
2.				
3.				
4.				

DO NOT WRITE BELOW THIS LINE

FOR EMPLOYER'S USE ONLY

R E F E R E N C E C H E C K	Employer	Person Contacted	Results

INTERVIEW RESULTS

INTERVIEW DATE	INTERVIEWED BY	INTERVIEW COMMENTS