Mayville Community Schools

6250 Fulton Street Mayville, MI 48744

Offic	ce Use Only
Date Rec'd: Position: Interview Date: Interviewer:	

EMPLOYMENT APPLICATION—SUPPORT STAFF

POSITION FOR WHICH YOU ARE A	APPLYING:
Full Name:	Today's Date:
Address:	Home Telephone:
Soc. Sec. #:	Business Tel:
Are you legally authorized to work in the United S	States? Yes No (If not, attach explanation)
Are there any other names under which your educational or work records can be found?	es No If yes, list name(s)
Earliest date available to begin work:	
Are there any felony or misdemeanor charges pend	ding against you?
Name, address, and telephone number of a person	we can contact in the event of an emergency:
Name:	
Address:	
Telephone:	Area Code
Please include any comments you believe would b	be helpful as we consider your application (may make attachments):

Mayville Community Schools is an Equal Opportunity Employer, and is in compliance with all federal and state non-discrimination laws and regulations.

of Institution (Inel. High Sch.) From -To Major(s) Minor(s) Hours Degree WORK EXPERIENCE Employer Location Position Dates MILITARY SERVICE Branch Duties Rank Dates Type of Discharge REFERENCES (at least three) REFERENCES (at least three) 1.				PROFESSIONA	L TRAINING	i r						
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and former employers from all liability for any information they may give you.												

Signature

Date