



CADDO PARISH SCHOOL SYSTEM
 1961 MIDWAY STREET
 P.O. BOX 32000
 SHREVEPORT, LA 71130-2000
 TELEPHONE (318) 603-6467
 FAX: (318) 603-6559



PROFESSIONAL AND CLASSIFIED POSITIONS

APPLICATION FOR EMPLOYMENT

CONFIDENTIAL

EQUAL EMPLOYMENT OPPORTUNITY

Caddo Parish School Board is an Equal Opportunity Employer. Applicants are considered for employment on the basis of qualifications without regard to race, color, national origin, religion, age, sex or handicapping condition. As provided by federal law, applicants are invited to request accommodation in order to complete the application or applicant procedures or to take any required employment test.

PLEASE PRINT OR TYPE

 DATE OF APPLICATION

PERSONAL INFORMATION

NAME _____
 LAST FIRST MIDDLE

OTHER NAMES USED ON OFFICIAL DOCUMENTS _____

PERMANENT ADDRESS _____
 NUMBER, STREET, P.O. BOX # APT # CITY ST ZIP

TEMPORARY ADDRESS _____
 NUMBER, STREET, P.O. BOX # APT # CITY ST ZIP

_____-_____-_____
 SOCIAL SECURITY NUMBER HOME PHONE () -- ARE YOU A USA CITIZEN? YES NO
 OTHER PHONE() --

DO YOU HAVE ANY RELATIVES EMPLOYED BY THE CADDO PARISH SCHOOL SYSTEM? YES NO

IF YES _____
 NAME SCHOOL/DEPARTMENT LOCATION RELATIONSHIP

WERE YOU EVER PREVIOUSLY EMPLOYED BY THE CADDO PARISH SCHOOL SYSTEM? YES NO

IF YES _____
 DATES EMPLOYED (FROM - TO) SCHOOL/DEPARTMENT LOCATION JOB TITLE

ARE YOU RETIRED FROM A LOUISIANA SCHOOL DISTRICT? YES NO

IF YES _____
 RETIREMENT PLAN NAME (EXAMPLE: TRSL, LSE OR OTHER)

MILITARY EXPERIENCE

DATE: From _____ To _____ BRANCH _____ FINAL RANK _____

TYPE OF DISCHARGE _____ WORK PERFORMED _____

EDUCATION

CIRCLE HIGHEST GRADE COMPLETED:

GRADE: 6 7 8 9 10 11 12

DID YOU RECEIVE A: DIPLOMA? _____ GED? _____

LAST HIGH SCHOOL ATTENDED:

NAME _____

DATES FROM-TO (MONTH/YEAR) _____

CITY, STATE, ZIP _____

COMMERCIAL /BUSINESS/VOCATIONAL SCHOOL:

NAME _____

SUBJECTS, TRADES, SKILLS _____

CITY, STATE, ZIP _____

DATES FROM-TO (MONTH/YEAR) _____

CERTIFICATE RECEIVED? _____ YES _____ NO

COLLEGE:

NAME _____

MAJOR/MINOR _____

GPA _____

CITY, STATE, ZIP _____

DEGREE OR HOURS _____

GRADUATION DATE _____

COLLEGE:

NAME _____

MAJOR/MINOR _____

GPA _____

CITY, STATE, ZIP _____

DEGREE OR HOURS _____

GRADUATION DATE _____

OTHER EDUCATION NOT DESCRIBED ABOVE:

SCHOLASTIC HONORS:

LICENSES AND/OR PROFESSIONAL CERTIFICATIONS

TYPE	AREAS OF CERTIFICATION	NUMBER	STATE	DATE ISSUED	DATE EXPIRES

COMPUTER AND/OR OFFICE SKILLS

	YES	NO		YEARS OF EXPERIENCE
TYPING/KEYBOARDING			IF YES, WPM _____	
10-KEY				
	YES	NO		
MICROSOFT WORD				
MICROSOFT EXCEL				
MICROSOFT ACCESS				
MICROSOFT PUBLISHER				
MICROSOFT POWER POINT				
OTHER				

WORK EXPERIENCE (List all jobs beginning with the most recent. Include complete addresses and phone numbers.)

EMPLOYER	JOB TITLES	SUPERVISORS' NAMES	REASON FOR LEAVING	EMPLOYED FROM/TO
NAME				
CITY, STATE, ZIP				
PHONE #				
DESCRIBE THE WORK YOU DID IN DETAIL				

NAME				
CITY, STATE, ZIP				
PHONE #				
DESCRIBE THE WORK YOU DID IN DETAIL				

NAME				
CITY, STATE, ZIP				
PHONE #				
DESCRIBE THE WORK YOU DID IN DETAIL				

NAME				
CITY, STATE, ZIP				
PHONE #				
DESCRIBE THE WORK YOU DID IN DETAIL				

(USE ADDITIONAL PAPER, IF NECESSARY)

May we contact your present employer? _____ Yes _____ No

When will you be available to begin work? _____

Have you ever been terminated? _____ Yes _____ No

If yes, explain _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, explain _____

DRIVER APPLICANTS ONLY:

Driver's License Number: _____ Type of Driver's License: _____ Expiration Date: _____

Describe any tickets for moving violations:

REQUIREMENTS

Louisiana law requires a criminal history records check for employees who supervise children. An applicant will be required to be fingerprinted and sign an Authorization to Disclose Criminal History Record Information form. The Human Resource Department will send the fingerprints and authorization form to the Department of Public Safety for the records check.
Absence of a criminal record does not guarantee employment by Caddo Parish School Board.

COMMENTS

Use this space to provide additional information that you believe would demonstrate your qualifications for a job with the Caddo Parish School Board.

AGREEMENT AND SIGNATURE

I certify that the information in this application is true and complete. I also certify that I have read the job description for the position and can perform the duties and responsibilities inherent in this position with or without reasonable accommodations. I understand that furnishing false information or omitting information on this application could disqualify me from consideration for employment or could lead to discharge from employment. You are hereby authorized to make any investigation of my personal and employment history.

_____ DATE

_____ SIGNATURE