Little Eagle Grant School Little Eagle, SD 57639 (P) 605-823-4235 (F) 605-823-2292

www.littleeagleschool.org

Employment Application

	t Information				
Full Name:		Date:			
	Last	First	M.I.		
Address:	~				
	Street			Apartment/Unit #	
	City		State	ZIP Code	
Phone:	()		E-mail:		
Available S	Start Date:		Social Security #: (optional)	
Position Ap	oplied for:				
YES Are you a citizen of the United States? Have you ever worked for this School? Have you ever been convicted of a felony?		If no, are you a If yes, when? If yes, explain:	uthorized to work in the US?		
Educatio	n				
	n ol:		Address:		
High Schoo			NO	Degree:	
High Schoo From:	ol: To:		NO Graduate? Address:		
High Schoo From: College:	ol: To:	YES 🗖	NO Graduate? Address: NO	Degree:	
High Schoo From: College: From:	ol: To:	YES □¢[YES □¢[NO → Graduate? Address: NO → Graduate? Address:	Degree:	
From: College:	ol: To:		NO Graduate? Address: NO Graduate? Address: Address:	Degree:	
High Schoo From: College: From: Other: From:	ol: To: To: To: To:	YES □¢[YES □¢[NO Graduate? Address: NO Graduate? Address: Address:	Degree:	
High Schoo From: College: From: Other: From: References	ol: To: To: To: To:		NO Graduate? Address: NO Graduate? Address: Address:	Degree:	
High Schoo From: College: From: Other: From: References Please list t	ol: To: To: To: To: To: s three professional references.	YES YES YES YES 	NO Graduate? Address: NO Graduate? Address: Address:	Degree:	
High Schoo From: College: From: Other: From: References	ol: To: To: To: To: s three professional references.	YES YES ↓¢	NO → Graduate? Address: NO → Graduate? Address: NO → Graduate?	Degree:	

Full Name:	Relationship:			
Company:	Phone:	()	
Address:				
Full Name:	Relationship:			
Company:	Phone:	()	
Address:				
Previous Employment Please list most recent / most relevant employment				
Company:	Phone:	()	
Address:	Supervisor			
Job Title:				
Responsibilities:				
From: To: 1	Reason for Leaving: Y No			
May we contact your previous supervisor/reference?				
Company:	Phone:	()	
Address:	Supervisor	:		
Job Title:				
Responsibilities:				
From: To: I	Reason for Leaving:			
	Y No			
May we contact your previous supervisor/reference?				
Company:	Phone:	()	
Address:	Supervisor	:		
Job Title:				
Responsibilities:				
From: To: 1	Reason for Leaving:			
May we contact your previous supervisor/reference?	Y No			

Military Service

Branch of Service:	From:	То:						
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
Years of Experience								
Position:	From:	То:						
Position:	From:	To:						
Position:	From:	To:						
Position:	From:	To:						
Position:	From:	To:						
Disclaimer and Signature								

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date:
