

**APPLICATION FOR CLASSIFIED POSITION**  
**BRAWLEY UNION HIGH SCHOOL DISTRICT**  
480 N. IMPERIAL AVENUE • BRAWLEY, CA 92227  
(760) 312 -5819 • FAX (760) 312-6067

**Instructions to Applicant:**

Read the job description desired to see if you meet the requirements, then show clearly on this application all previous work experience, education and training which qualifies you for this job.

Answer all questions completely and accurately.

False statements are cause for rejection of application, removal of name from eligibility list, or dismissal from employment.

FILL OUT CAREFULLY AND DELIVER TO PERSONNEL SERVICES

Position applied for : \_\_\_\_\_

Name: \_\_\_\_\_

First Name

Middle

Last

Address: \_\_\_\_\_

Number and Street / P.O. Box

\_\_\_\_\_

City

State

Zip

County

Home Phone: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Have you ever worked using a different name than above? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name used: \_\_\_\_\_

Are you presently employed by the Brawley Union High School District? \_\_\_\_\_

If yes, present work location: \_\_\_\_\_

Have you ever worked for the BUHSD? Yes \_\_\_\_\_ No \_\_\_\_\_ When? \_\_\_\_\_

Driver's License # : \_\_\_\_\_ Class: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

If hired, can you provide proof of your legal right to work in the U.S. ? \_\_\_\_\_

Have you suffered any major diseases, ailments or physical injuries or had a history of hospitalization or do you now have any physical limitations? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain fully: \_\_\_\_\_

Do you have relatives working for the BUHSD?: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, who? \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor (except for juvenile convictions)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain fully (Please be reminded that being convicted of a felony in itself does not void your chances of employment, that all employment selections shall be based on job related qualifications):

Federal Military Service: Have you ever been a member of the Armed Forces of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Last Rank or Rating: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Do you possess an honorable discharge from your last active duty? Yes \_\_\_\_\_ No \_\_\_\_\_ Date of discharge: \_\_\_\_\_  
Languages applicant reads, speaks or writes fluently: \_\_\_\_\_

Education: List high schools, colleges or trade schools attended:

Schools Attended	Dates Attended	Degree or Diploma Earned
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		
6. _____		

Experience: List previous places of employment for the last five (5) years. Begin with your present or most recent job:

Employer, Address & Phone #	Dates	Duties Performed
1. _____		
2. _____		
3. _____		

References: These should be persons qualified to provide information concerning your fitness for the position you seek.

Name	Address & Phone Number	Occupation
1. _____		
2. _____		
3. _____		

In filing this application for employment, I give my permission for the schools, companies, and individuals listed in this application to release any information or records requested by the Brawley Union High School District.

Should my application be accepted, I agree to submit verification of tuberculosis examination, fingerprint cards, and loyalty oath as required. Any misstatements or omissions of material facts in this application may be cause for dismissal.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**The Brawley Union High School District is committed to equal opportunity for all individuals in education. District programs and activities shall be free from discrimination based on gender, sex, race, color, religion, national origin, ethnic group identification, physical or mental disability, sexual orientation, or the perception of one or more of such characteristics. *El Distrito Escolar de la Preparatoria de Brawley se compromete a la igualdad de oportunidad para todos los individuos en la educación. Los programas y actividades del Distrito no discriminarán debido al género, sexo, raza, color, religión, linaje, nacionalidad, identificación de grupo étnico, discapacidad mental o física, orientación sexual, o sobre la percepción de una o más de tales características.***