

READING SCHOOL DISTRICT
READING, PENNSYLVANIA
SUPPORT SERVICES PERSONNEL
APPLICATION

(PLEASE PRINT OR TYPE)

NAME _____
LAST FIRST MIDDLE SOCIAL SECURITY NUMBER

PRESENT ADDRESS _____
STREET (AREA CODE) TELEPHONE
CITY STATE ZIP CODE

FORMER ADDRESS _____
STREET (AREA CODE) TELEPHONE
CITY STATE ZIP CODE

EMAIL ADDRESS (IF AVAILABLE) _____

POSITION(S) DESIRED

LIST, IN ORDER OF PREFERENCE, THE POSITION(S) FOR WHICH YOU ARE APPLYING:

1. _____ 2. _____ 3. _____

Are you interested in working part-time in the above categories? _____

Are you interested in working as a substitute in the above categories? _____

PERSONAL INFORMATION

In case of emergency notify _____

Address _____ Telephone () _____

Do you have any impairments which would interfere with your ability to do the job for which you applied? _____

If Yes, describe: _____

Have you ever been convicted of a crime? _____ If so, where, and nature of offense? _____

If transportation is necessary for a given position, can you provide it? _____

Date available to start work: _____

Applications will be kept on file for a period of one (1) year. Candidates recommended for election are required to have a physical examination, at their own expense, prior to beginning their duties.

Please complete this application and mail to:
Reading School District
Human Resource Dept.
800 Washington Street
Reading, PA 19601-3691

EDUCATIONAL BACKGROUND

	SCHOOL OR INSTITUTION AND LOCATION	MAJOR/ MINOR	DIPLOMAS, DEGREES, OR CREDITS EARNED	GRADE POINT AVERAGE (GPA)
HIGH SCHOOL				
COLLEGE/UNIVERSITY				
COLLEGE/UNIVERSITY				
GRADUATE STUDY				
GRADUATE STUDY				

EXPERIENCE

(PRESENT OR MOST RECENT FIRST)

Dates		Name of Employer and Address	Your Title
From			
To			
		(Area Code) Telephone:	
Work Performed		Reason for Leaving	
Name & Title of Supervisor:			Final Yearly Salary:

Dates		Name of Employer and Address	Your Title
From			
To			
		(Area Code) Telephone:	
Work Performed		Reason for Leaving	
Name & Title of Supervisor:			Final Yearly Salary:

Dates		Name of Employer and Address	Your Title
From			
To			
		(Area Code) Telephone:	
Work Performed		Reason for Leaving	
Name & Title of Supervisor:			Final Yearly Salary:

SECRETARIAL/CLERICAL APPLICANTS ONLY:

If you have applied for a Secretarial/Clerical position, please complete the following skill list:

Shorthand (yes or no): _____ wpm: _____ Length of Time Studied: _____

Typing (yes or no): _____ wpm: _____ Length of Time Studied: _____

Bookkeeping (yes or no): _____ wpm: _____ Length of Time Studied: _____

Filing (yes or no): _____ Word Processing (yes or no): _____

Office Machines Operated (Bookkeeping, Payroll, etc.): _____

Additional Studies or Experience (Computers, Office Management, etc.): _____

EDUCATIONAL AIDE APPLICANTS ONLY:

Place an X next to the specific position(s) in which you are interested:

Bilingual Caseworker	_____	Guidance/Career Center	_____	Mathematics	_____
Bilingual Instruction	_____	Health (full-time)*	_____	Security	_____
Bilingual Home Visiting	_____	Home Economics	_____	Special Education	_____
Business Department	_____			Swimming Pool	_____

*requires C.P.R. certificate and First Aid certificate

Experience working with children: _____

Age level of children with whom you prefer to work: _____

MAINTENANCE/CUSTODIAL APPLICANTS ONLY:

Place an X next to the work you have successfully performed:

Cleaning	_____	Carpentry work	_____	Bricklaying	_____
Dusting	_____	Plumbing	_____	Cement finishing	_____
Wash windows	_____	Steam fitting	_____	Concrete work	_____
Drive truck	_____	Electrical work	_____	Machinist	_____
Truck mechanics	_____	Refrigeration	_____	Window shade	_____
Truck body work	_____	Sheet metal work	_____	Roofing work	_____
Grass cutting	_____	Plastering	_____	Other:	_____
Gardening	_____	Painting	_____		

Additional Related Training and Experience: _____

FOOD SERVICE APPLICANTS ONLY:

List any special training in food service: _____

Have you had any experience in the preparation or service of large quantities of food? _____

Describe that related experience: _____

JOB RELATED REFERENCES

(Do not include relatives – List people familiar with your training and experience)

Name: _____ Address: _____ Phone: (____) _____
Area Code

Position: _____

Name: _____ Address: _____ Phone: (____) _____
Area Code

Position: _____

PERSONAL REFERENCES

(Do not include relatives – List people who are very familiar with your character)

Name: _____ Address: _____ Phone: (____) _____
Area Code

Name: _____ Address: _____ Phone: (____) _____
Area Code

CERTIFICATION

I certify that any and all information which I have set forth in this application is true and accurate to the best of my knowledge. I also recognize that any misstatement I have made herein may subject me to discharge, in the event that I am hired. I understand that the **READING SCHOOL DISTRICT** is an **EQUAL OPPORTUNITY EMPLOYER**.

Applicant's Signature

Applications will be kept on file for a period of one (1) year. Candidates recommended for election are required to have a physical examination, at their own expense, prior to beginning their duties.

All applicants must submit with their application for employment the following clearances, which are all available in the Reading School District Human Resources Office:

- 1. Pennsylvania State Police Request for Criminal History Check**
- 2. Pennsylvania Child Abuse History Clearance**
- 3. Report of Federal Criminal History Records pursuant to the Federal Bureau of Investigation appropriation of Title II of Public Law 92-544, 886 Stat. 1115.**