



## APPLICATION FOR EMPLOYMENT

### An Equal Opportunity Employer

Welcome to the Los Alamitos Education Foundation (LAEF). We appreciate the opportunity to review your qualifications for employment with our organization. So that we can thoroughly consider your skills and abilities, we would appreciate your completing this Application for Employment. This application will be valid for six months from the date of the application. If you wish to be considered for employment subsequent to that date, a new application must be completed. Please read each question carefully and give honest and complete answers. All offers of employment are conditioned on the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States.

Please answer all questions in this application completely and thoroughly. Do not simply write "See Resume." Complete responses are required for each item.

#### General Information: Please Print.

Last Name	First Name	Middle Name
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Other Names under which you have been employed:

Address	Social Security Number
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City	State	Zip	Phone
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Are you at least 18 years old?  YES  NO      Do you have a legal right to work in this country?  YES  NO

Have you ever been convicted of (or pleaded guilty or nolo contendere to) a crime including sex-related or child abuse-related crimes? (Do not identify marijuana related misdemeanor convictions occurring more than two years ago or convictions for which the criminal record has been expunged, sealed or eradicated by the court, or misdemeanor convictions for which any probation has been completed and the case dismissed by the court.)

NO  YES If yes, number of times \_\_\_\_\_ If yes, Explain:

Do you currently have pending any unresolved criminal charges, including sex-related or child abuse, (E.G. an arrest that has not yet resulted in a conviction, plea, acquittal or a dropping of the charge) for which you are out on bail or on your own recognizance pending trial?

NO  YES If yes, explain fully. (Such an unresolved criminal charge will not necessarily disqualify an applicant.)

Are you able to perform the essential functions of the job, with or without reasonable accommodation, for which you are applying?  YES  NO

#### Job Interest:

Position for which you are applying: \_\_\_\_\_ Other positions for which you would like to be considered: \_\_\_\_\_

Salary Desired	Date you can start	Do you want to work <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	Hours unavailable for work
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Have you ever applied for or worked for LAEF before? YES NO

If so, how or when?

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Do you have any friends, relatives or acquaintances who work for LAEF? YES NO

If so, please list all names:

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Please list office equipment competency:

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### Education and Qualifications:

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Highest level of school/education completed:

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Please list any education, training, or specialized experience skills, or qualifications you think relate to the position(s) applied for that would help you perform the work. (*I.E.* schools, colleges, degrees, licenses, vocational or technical programs, military training, foreign language, *etc.*). List from most recent.

**Name and location of Institution:**

**Degree, license, special achievement, experience, training**

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Do you currently hold a California Teaching Credential or Emergency Permit? YES NO

If yes, what type? If Single Subject, in what field of study? \_\_\_\_\_

If no, are you currently enrolled in a credentialing program? YES If yes, where? \_\_\_\_\_ NO

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### Personal References:

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Please provide at least three personal, non-family references:

Name and Occupation	Phone	Relationship

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### Employment History:

List your last 3 employers, starting with the most recent. Please answer completely. Do not write "See Resume."

Name of present or last employer:		Name of Supervisor: (may we contact? <input type="checkbox"/> YES <input type="checkbox"/> NO)		
Address	City	State	Zip	Phone
Dates: From: (MM/YY) To:	Salary: Starting \$ Ending \$	per per	Position / Title:	
Duties/Description of work:				
Exact reason for leaving:				

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Previous employer:		Name of Supervisor: (may we contact? <input type="checkbox"/> YES <input type="checkbox"/> NO)		
Address	City	State	Zip	Phone
Dates: From: (MM/YY) To:	Salary: Starting \$ Ending \$	per per	Position / Title:	
Duties/Description of work:				
Exact reason for leaving:				

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Previous employer:		Name of Supervisor: (may we contact? <input type="checkbox"/> YES <input type="checkbox"/> NO)		
Address	City	State	Zip	Phone
Dates: From: (MM/YY) To:	Salary: Starting \$ Ending \$	per per	Position / Title:	
Duties/Description of work:				
Exact reason for leaving:				

Please explain gaps in your employment history, if any.

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Have you been terminated from a previous job? NO YES If Yes, please explain:

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Do you plan on having another job while working for LAEF? NO YES If Yes, please explain:

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**PLEASE READ BEFORE SIGNING**

I hereby certify all of my statements and information provided on this application are true and complete to the best of my knowledge and understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer of employment , or if I am hired, in the termination of my employment.

I authorize investigation of all statements contained herein and the references and employers listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and hereby release all persons or agencies from all liability for any damage for issuing this information and release Los Alamitos Education Foundation (LAEF) from all liability for any damage that may result from utilization of such information.

Employment is with the mutual consent of you and LAEF. Consequently both you and LAEF have the right to terminate the employment relationship at any time, with or without cause or advance notice.

This employment at-will relationship constitutes the entire agreement between you and LAEF on the subject of termination and it supersedes all prior agreements. Although other LAEF policies and procedures may change from time to time, this employment at-will relationship will remain in effect throughout your employment with LAEF unless it is specifically modified by an express written agreement signed by you and the Executive Director at LAEF. This employment at-will relationship may not be modified by any oral or implied agreement.

If you are offered employment as a teacher by LAEF, the offer of employment will be contingent upon the satisfactory result of a Department of Justice background check. If you do not want to have a Department of Justice background check, you should withdraw your application.

**Please read carefully and initial each paragraph before signing:**

“I agree to immediately notify LAEF if I should be convicted of or plead guilty or nolo contendere to any crime while my job application is pending or during my period of employment if hired.”      **Initials** \_\_\_\_\_

“If offered employment I understand that I will be required to review complete and execute various employment documents (including, but not limited to this application, employee handbook and employee handbook receipt form, confidentiality and non-disclosure agreements), and agree that the process of my being hired will not be complete until all employment documents have been signed.”  
**Initials** \_\_\_\_\_

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**LAEF IS AN EQUAL OPPORTUNITY EMPLOYER**