



# Mercer Island Public Schools

## Application for Classified Employment

*Mercer Island School District is an Affirmative Action Equal Opportunity Employer*

**JOB LINE**  
**(206) 236-3302**

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Today's Date \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Other Phone ( ) \_\_\_\_\_  
Street City State Zip

Position(s) Desired \_\_\_\_\_ Full-time  Part-time  Substitute

### INSTRUCTIONS

- **This application should be completed in full even though a resumé is required.**
- A complete application file must include a resumé, a letter of interest relating your qualifications to the position desired and a District application.
- An "active application" does not guarantee your candidacy for posted positions. Please periodically contact the District job line at 236-3302 to learn about open District positions. The job line will instruct you how to obtain a District application or how to activate your application currently on file.
- Application files are kept active for one calendar year, and then will be destroyed unless the Personnel Office receives a request to reactivate your application file.

### PERSONAL INFORMATION

Have you previously worked for the Mercer Island School District? \_\_\_\_\_ If yes, please indicate during which year(s) and in what capacity?  
\_\_\_\_\_

Have you been convicted of any criminal offense within the past seven years? \_\_\_\_\_ If yes, please explain through attachment. (Note to applicant: a conviction record will not necessarily bar you from employment with the Mercer Island School District.)

Some applicants who have a mental, physical or sensory disability require an accommodation or assistance to enable them to perform the essential functions of the position sought. Are you able to perform the essential functions of the position for which you are applying (with or without an accommodation)?  yes  no  
If an accommodation is needed, please describe the nature of the accommodation: \_\_\_\_\_

I certify that the information herein is a true and complete statement of my personal and professional record to date. I authorize you to make such investigations and inquiries of my person, employment, or financial history, and other related matters as may be necessary in arriving at an employment decision.

*(I understand that false or misleading information in my application or interview may result in discharge or withdrawal from consideration.)*

(Signature) \_\_\_\_\_ Date \_\_\_\_\_

**Work History:** Beginning with your present or most recent employment, list your work history, including Military Service. Please complete the following sections even though you are submitting a resumé in addition to this application.

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From: _____ To: _____	Employer's Name _____	Phone _____
	Address _____	Supervisor _____

Position \_\_\_\_\_ Hours worked per Week \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_ May we contact this Employer? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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From: _____ To: _____	Employer's Name _____	Phone _____
	Address _____	Supervisor _____

Position \_\_\_\_\_ Hours worked per Week \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_ May we contact this Employer? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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From: _____ To: _____	Employer's Name _____	Phone _____
	Address _____	Supervisor _____

Position \_\_\_\_\_ Hours worked per Week \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_ May we contact this Employer? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**Additional Qualifications:** Describe any special abilities, skills, experiences, volunteer work, and knowledge that you possess which you believe further qualify you to perform the type of work for which you are applying.

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**Educational Background:**

Type of School	Name & Location	Dates Attended	Major/Minor	Degree/Diploma Received	Date Received
High School					
Business/ Technical/ Other					
College/ University					

**Licenses/Certificates:** (List any licenses/certificates which you currently hold.)

License/Certificate Type	Issue Date	Expiration Date

**References:** (List name and addresses of 3 persons, including former supervisors, who could provide information concerning your qualifications for employment.)

Name	Address	Phone	Position Title

*We would like to take this opportunity to thank you for your employment interest in the Mercer Island School District. We appreciate your consideration of our District and wish you success in your employment endeavors.*