

# SHENANGO AREA SCHOOL DISTRICT APPLICATION FOR CUSTODIAN/MAINTENANCE

Please return completed application to:  
Superintendent's Office  
Shenango Area School District  
2501 Old Pittsburgh Road  
New Castle, PA 16101

(PLEASE PRINT OR TYPE)

POSITION(S) DESIRED \_\_\_\_\_

NAME \_\_\_\_\_

LAST

FIRST

MIDDLE

SOCIAL SECURITY NUMBER \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

STREET

(AREA CODE) TELEPHONE \_\_\_\_\_

CITY

STATE

ZIP CODE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

DATE AVAILABLE FOR EMPLOYMENT \_\_\_\_\_

IF YOU ARE NOT EMPLOYED FULL TIME, ARE YOU INTERESTED IN BEING PLACED ON OUR SUBSTITUTE LIST?      YES      NO

## EDUCATIONAL BACKGROUND

	SCHOOL OR INSTITUTION AND LOCATION	DIPLOMAS, DEGREES OR CREDITS EARNED
HIGH SCHOOL		
COLLEGE/UNIVERSITY		
COLLEGE/UNIVERSITY		

## 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 Salary: _____

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

### REFERENCES

References should include individuals who have first-hand knowledge of your competence and your personal qualifications. If any person(s) listed should not be contacted for reference at the present time, indicate in the left-hand margin the date contact(s) may be made.

NAME	POSITION	ADDRESS	TELEPHONE

### OTHER QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experiences (including U.S. military service) or additional information you feel may be helpful in considering your application.

Do you have any time restrictions that would prevent you from working various shifts at different times of the year?

---

---

---

Do you have any physical limitations that would prevent you from lifting heavy objects such as classroom furniture?

---

---

---

Do you have any medical conditions that would prevent you from working with cleaning solutions, floor wax, paint, etc?

---

---

---

### GENERAL BACKGROUND INFORMATION

You must give complete answers to all questions. If you answer "Yes" to any question, you must list all offenses, and for each conviction provide date of conviction and disposition, regardless of the date or location of occurrence. Conviction of a criminal offense is not a bar to employment in all cases. Each case is considered on its merits. Your answers will be verified with appropriate police records.

Criminal Offense includes felonies, misdemeanors, summary offenses and convictions resulting from a plea of "nolo contendere" (no contest).

Conviction is an adjudication of guilt and includes determinations before a court, a district justice or a magistrate, which results in a fine, sentence or probation.

You may omit: minor traffic violations, offenses committed before your 18th birthday which were adjudicated in juvenile court or under a Youth Offender Law, and any convictions which have been expunged by a court or for which you successfully completed an Accelerated Rehabilitative Disposition program.

Were you ever convicted of a criminal offense?  Yes  No

Are you currently under charges for a criminal offense?  Yes  No

Have you ever forfeited bond or collateral in connection with a criminal offense?  Yes  No

Within the last ten years, have you been fired from any job for any reason?  Yes  No

Within the last ten years, have you quit a job after being notified that you would be fired?  Yes  No

Are you subject to any visa or immigration status, which would prevent lawful employment?  Yes  No

**Note:** If you answered "Yes" to any of the above questions, please provide a detailed explanation on a separate sheet of paper, including dates, and attach it to this application. Please print and sign your name on the sheet, and include your social security number.

**ACT 34 Clearance (PA State Police Criminal Background Check)**

Each applicant must submit with his/her employment application a copy of a Criminal History Record from the Pennsylvania State Police. Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.

\*\*\*\*\*

**ACT 114 (Federal Criminal History Record)**

Each applicant must submit with his/her employment application a copy of a Federal Criminal Record from the Federal Bureau of Investigation (FBI). Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.

\*\*\*\*\*

**ACT 151 Clearance (PA Child Abuse History Clearance)**

Each candidate must submit with his/her employment application a copy of an official clearance from the Pennsylvania Department of Public Welfare. Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.

\*\*\*\*\*

**CERTIFICATION AND RELEASE AUTHORIZATION**

I certify that all of the statements made by me are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I further certify that I am the sole author of the essay. I understand that any misrepresentation of information shall be sufficient cause for: (1) rejecting my candidacy, (2) withdrawing of any offer of employment, or (3) terminating my employment.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and to respond fully and completely to all questions that officials of \_\_\_\_\_ (school district) may ask regarding my prior work history and performance. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to this school district. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and release from liability all persons and/or entities supplying information regarding my background. However, I do not authorize the production of medical records or other information, which would tend to actually identify a disability nor do I authorize inquiries which would include information related to any medical condition or medical history. Further, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by the school district or by entities or persons providing such information to the school district, including any and all claims concerning allegations of employment discrimination because of race, color, sex, religion, national origin, ancestry, age or disability.

Date

Signature of Candidate (in ink)  
[Must be original]

*Pennsylvania school districts shall not discriminate in their educational programs, activities or employment practices based on race, color, national origin, sex, disability, age, religion, ancestry or any other legally protected classification. This policy is in accordance with state and federal laws, including Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and the Pennsylvania Human Relations Act. Information relative to special accommodation, grievance procedure, and the designated responsible official for compliance with Title VI, Title IX, and Section 504 may be obtained by contacting the school district.*