



# The Lighthouse School

"Lighting the way to a brighter future"

62858 Highway 101  
Coos Bay, OR 97420  
(541) 751-1649



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## APPLICATION FOR EMPLOYMENT

(Please print or type clearly)

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Date: \_\_\_\_\_ Position applying for: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Mailing Address (if different than above): \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Message phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Employment Experience

Please account for all periods of employment. Attach additional sheets if more space is needed. Begin with current or most recent employer and include all work history relevant to the position applied for. Include volunteer experience. Completion of this section is required.

**Job Title** \_\_\_\_\_ Start date \_\_\_\_\_ End Date \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

May we contact this employer? Yes [ ] No [ ]

Direct Supervisor \_\_\_\_\_ Number of people you supervised \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Duties and responsibilities \_\_\_\_\_

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## Education and Training Summary

### COLLEGES, NURSING, MILITARY, TRADES, BUSINESS OR OTHER SCHOOLS ATTENDED

Name of School and Location	Total Number of Hours	Type of Training or Major	Name of Certificate or Degree Received

## Licenses and Certificates

List below any licenses/certificates that you have that may be required for this position.

Title of License or Certificate

Number \_\_\_\_\_ Issuing Agency \_\_\_\_\_ Expiration Date \_\_\_\_\_

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### For Office Positions:

How many words per minute can you type? \_\_\_\_\_

Can you use a 10-key? What is your speed? \_\_\_\_\_

Please put a check by the programs that you are proficient in: Word [ ] Excel [ ] Publisher [ ]

Power Point [ ] Access [ ] Outlook [ ]

Please put a check by the functions that you are proficient in: Backing up a computer [ ] Renaming a file [ ]

Renaming a flash drive [ ] HTML [ ] Saving files [ ] Grammar [ ] Spelling without spellcheck [ ]

Punctuation [ ]

## **Certification of Information/Release**

### **BY MY SIGNATURE BELOW, I:**

Authorize the investigation of all matters which The Lighthouse School deems relevant to my qualifications for employment, including all statements made in this application and in any attachments or supporting documents and in any interviews. I authorize you to request and receive such information and I release from all liability any persons (such as current or former supervisors, co-workers, etc.) employers or other entities (schools, etc.) supplying it. I also release you from all liability, which might result from making the investigation.

Certify that the facts and information given in this application, in any attachment or supporting documents and in any interviews are (or will be) true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission as well as any misleading statements or omissions, generally will result in denial of employment or immediate termination, regardless of when or how discovered.

Understand that I may be required to submit to pre-employment or post-employment physical examination or other professional examinations, medical inquiries and/or urinalysis tests for the presence of drugs or alcohol. I agree to such examinations inquiries or testing. I authorize release of the results to The Lighthouse School to evaluate my suitability for employment. I release The Lighthouse School from all liability arising out of or connected with any examinations, inquiries or testing.

Understand and agree that if I am hired the statements in these paragraphs will become a binding part of my employment relationship. I have read each of these statements. I have reviewed all of the information provided in this application and in any attachments or supporting documents.

Understand that if I am hired as a temporary employee, I cannot expect continued employment in a temporary position or to automatically become a regular employee. As a temporary employee, I may be disciplined or discharged from employment for any lawful reasons without warning.

**NOTE:** Applications or resumés cannot be returned. Please make necessary copies before submitting your application. A separate application is required for each individual vacancy. Unsigned applications will not be processed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_