



**BEACON SCHOOL**  
John F. Font, PH.D. Associates, Inc

5670 Camden Ave  
San Jose, CA 95124  
Ph: (408) 265-8611  
Fx: (408) 265-7324

## Employment Application

<b>General Information</b>			
What position(s) are you applying for?			
Name (Last, First, Middle)		Email Address:	
Mailing Address	City	State	Zip Code
Home Phone	Were you ever employed by Beacon? _____ If yes, job title: _____ Duties: _____ Location: _____ Dates of employment: _____	Please list any relatives that work or have worked Beacon.	
Cell Phone	<b>Emergency Contact (Name):</b>	<b>Emergency Contact (Phone No.)</b>	
Are you eligible to work in the United States?    Yes            No			

How did you hear about employment with Beacon?
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<b>Availability</b>		
Earliest start date -	Previous Pay -	Desired pay range -
What hours are you available to work?	Please list any special skill/training related to position applied for:	

<b>The following questions are related to our certification requirements</b>
Do you presently have finger prints on file? _____ Where? _____
Have you had a T.B. Test in the past 4 years? _____ When? _____
Do you have any physical limitations? _____
Yes _____ No _____ If yes, Please describe. _____
Have you ever been convicted of a felony in the past? Yes _____ No _____
If yes please describe: _____

List each of your employers starting with your last employer.

<b>Employment History</b>				
Employer/Company Phone	Address of Company City, State, Zip	Length of Employment Mo./Yr. to Mo. /Yr	Your Position Title/ Supervisor Name	Reason for Leaving
1.				
2.				
3.				
4.				

<b>EDUCATION</b>				
HIGH SCHOOL -	School / City	Major / Degree / Year		
COLLEGE (4YR)				
COLLEGE -				
CREDENTIAL (S)				
TYPE _____	STATE _____	ID# _____	EXP _____	
TYPE _____	STATE _____	ID# _____	EXP _____	
TYPE _____	STATE _____	ID# _____	EXP _____	
<u>LICENSE</u>				
TYPE _____	STATE _____	ID# _____	EXP _____	
OTHER QUALIFICATIONS/TRAINING (Describe) _____				
_____				

<u>REFERENCES</u>
NAME: _____ FIRM: _____ Phone: ( ) _____
NAME: _____ FIRM: _____ Phone: ( ) _____
NAME: _____ FIRM: _____ Phone: ( ) _____
MAY WE CONTACT YOUR PREVIOUSAND/OR CURRENT EMPLOYER FOR A REFERENCE? _____

The information provided here is, to the best of my knowledge, true and accurate. I understand that, if employed, I am responsible for obtaining a current T.B. test report and providing a record of my finger prints. (State Codes). If my salary is dependent on credentials or licenses, I understand that it is my responsibility to keep these current and to provide documentation to verify current status.

Signature of Applicant	Date
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<b>Office Use Only</b>
<u>Notes</u>

## Getting Acquainted

What are your own special interests/hobbies?

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What are your strong skills/areas?

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What would you like to improve?

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What is important to you in your working day?

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How would you deal with a student who was about to hit another student?

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