

Employer City, State	Position	Description of Duties	Inclusive Dates From/To

5. Professional References: List three professional references who can vouch for your character and qualifications with preference given to supervisors under whom you have most recently worked.

Name	Position	Complete Address St., City, State, Zip	Phone (if known)

I declare the foregoing, to the best of knowledge, to be an accurate and complete statement of facts. I understand that the failure to provide requested information of any false statement herein will serve as cause for rejection of the application or, if discovered later, for discharge. I authorize reference and background checks and the investigation of all statements contained in this application for employment. Furthermore, I understand that my employment is subject to satisfactory replies from references, and I hereby relieve Seneca Community Consolidated Grade School Dist. #170 and all references from any and all liability concerning the release of confidential information. Furthermore, I acknowledge that employment is contingent upon and subject to a post offer physical and medical requirements, background checks, and the Illinois Criminal Background Investigation. If accepted for employment, I hereby agree to obey all rules and regulations.

Applicant's Signature

Date

IF EMPLOYED, THIS APPLICATION BECOMES A PERMANENT PART OF YOUR PERSONNEL FILE

