

WORCESTER COUNTY BOARD OF EDUCATION

NONCERTIFICATED APPLICATION

NAME: _____
 Last First Middle Maiden

TODAY'S DATE: _____

ADDRESS: _____

SOCIAL SECURITY #: _____

TELEPHONE: _____

CHECK AREA(S) DESIRED:

- | | | | | |
|---------------------|---|---|-----------------|------------------------------------|
| _____ Secretarial * | Educational Assistant * | Maintenance | _____ Custodial | Cafeteria |
| | <input type="checkbox"/> Classroom ** | <input type="checkbox"/> Carpentry | | <input type="checkbox"/> Assistant |
| | <input type="checkbox"/> Special Education ** | <input type="checkbox"/> Electrical *** | | <input type="checkbox"/> Driver |
| | <input type="checkbox"/> Alternative Education ** | <input type="checkbox"/> General | | <input type="checkbox"/> Manager |
| | <input type="checkbox"/> Computer Lab ** | <input type="checkbox"/> HVAC *** | | |
| | <input type="checkbox"/> Office | <input type="checkbox"/> Plumbing *** | | |
| | <input type="checkbox"/> Bus | | | |

* Minimum educational requirement is a high school diploma or General Education Development (G.E.D.)

** Minimum educational requirement is 2 years of college (48 credits) or, an Associates Degree or the Maryland State Department of Education Instructional Paraprofessional Credential (**must provide proof**)

*** Must provide a copy of license

SCHOOL(S) IN WHICH YOU WOULD BE WILLING TO WORK: (please check)

- | | | |
|---|--|--|
| <input type="checkbox"/> Showell Elementary School | <input type="checkbox"/> Berlin Intermediate School | <input type="checkbox"/> Stephen Decatur High School |
| <input type="checkbox"/> Ocean City Elementary School | <input type="checkbox"/> Snow Hill Middle School | <input type="checkbox"/> Snow Hill High School |
| <input type="checkbox"/> Buckingham Elementary School | <input type="checkbox"/> Pocomoke Middle School | <input type="checkbox"/> Pocomoke High School |
| <input type="checkbox"/> Snow Hill Elementary School | <input type="checkbox"/> Stephen Decatur Middle School | <input type="checkbox"/> Career & Technology Center |
| <input type="checkbox"/> Pocomoke Elementary School | <input type="checkbox"/> Cedar Chapel Special School | <input type="checkbox"/> Central Office |
| | <input type="checkbox"/> Alternative Learning Center | <input type="checkbox"/> Central Kitchen |

EDUCATIONAL BACKGROUND:

Name of School	Location	Dates of Attendance	Highest Grade Completed

WORK EXPERIENCE:

Name of Company	Position Held	Dates of Employment	Reasons for Leaving

Description of Duties: _____

Company Address: _____

Supervisor: _____

Telephone: _____

WORK EXPERIENCE (continued)

Name of Company	Position Held	Dates of Employment	Reasons for Leaving

Description of Duties: _____

Company Address: _____ Supervisor: _____

Telephone: _____

Name of Company	Position Held	Dates of Employment	Reasons for Leaving

Description of Duties: _____

Company Address: _____ Supervisor: _____

Telephone: _____

PERSONAL REFERENCES: (please give complete names and mailing addresses)

1. _____

2. _____

3. _____

GENERAL BACKGROUND INFORMATION:

Have you ever been convicted of a crime? *(Do not include minor traffic violations for which a fine of \$100 or less was imposed.)* YES NO

Have you ever been dismissed, asked to resign, or been refused reemployment? YES NO

Have you ever been charged with any offense relating to children? YES NO

In any previous work experience, have you ever received an oral or written reprimand? YES NO

If your answer to any of these questions is "yes", please provide details on a separate sheet of paper.

This application, if you are employed, will become a part of your record. Deliberate misrepresentation will endanger your employment.

It is the responsibility of the applicants to notify the Board of Education by January 1 of each year of their continued interest in obtaining employment in Worcester County. This notification will assure that the application is kept active for the next year.

In order for the Worcester County Board of Education to obtain information regarding my competency for the position for which I am applying, I hereby authorize its agents to contact persons named herein as references and other persons who might contribute job-related information to my file. Additionally, I authorize those persons contacted to release the information requested by said agents and waive my right to access to those records.

SIGNATURE: _____ DATE: _____

Correspondence relating to this application should be addressed to: Worcester County Board of Education
Human Resources
6270 Worcester Highway
Newark, Maryland 21841-9746

The Worcester County Board of Education does not discriminate in admissions, access, treatment, or employment in its programs and activities on the basis of race, color, sex, age, national origin, religion or disability.