

Send Application below to:

3909 Adelphi Lane Austin, Texas 78727

Phone: (512) 291.7151 or Fax: (512) 873.7121 or Email: infor@fourseasonscommunityschool.com

Name: _____ Date: _____ Address: _____ City: _____ State: ____ Zip: ____ Home Phone: _____ Cell Phone: _____ Email: ____ Date you can start: _____ Desired Hourly rate: _____

CPR certified? ____ First Aid certified? _____

Currently employed? ____ If so, may we contact your current employer? Current Employer Information Name: _____ Date: _____ Address: City: _____ State: ____ Zip: ____ Home Phone: _____ Cell Phone: _____ How would your current employer like to be contacted? ______ Education High School: _____ Did you graduate: College: ____ City: __ ____ Years attended: _____ Did you graduate: _____ Degree: ____ Multiple languages: _____ Fluency level: ____ If so, then please list: _____

Continuing Education / Certification			
Please include program title and date completed.			
Relevant work experience			
List prior employers, volunteer po	sitions, and	other related experience	
for the position to which you are			
whether employers may or may not b	e contacted.		
References (please provide	throa)		
	•	Data	
Name:		Date:	
Address:	Stato	7; 2:	
City:	Cell Phone:	ZIP	
Email:	_ ccii i none.		
What is your association with this	reference?		
How would they like to be contacte	d?		
Name:		Date:	
Address:			
City:			
Home Phone:	_ Cell Phone:		
Email:	nafanana)		
What is your association with this How would they like to be contacte	reterence: _		
now would they like to be contacte	u:		
Name:		Date:	
Address:		2.	
City:	State:	Zip:	
Home Phone:			
Email:		0	
What is your association with this			
How would they like to be contacte	d?		

APPLICANTS AND EMPLOYESS ARE EVALUATED WITHOUT REGARDS TO RACE, RELIGION, COLOR, NATIONAL ORIGIN, SEX, AGE, MARITAL STATUS, MENTAL OR PHYSICAL DISABILITY OR OTHER PROTECTED STATUS UNRELATED TO THE PERFORMANCE OF THE WORK INVOLVED.

I understand that the School will rely, in part, on the information I provide in this Application for Employment in considering whether to hire me. I understand that it is important that I provide complete and accurate information and certify that I have done so. If the School discovers at any time that I failed to completely and honestly provide any information requested of me in this Application of Employment or during the interview process, I understand that my application will no longer be considered or, if I am working for the School, that I will be subject to discipline, up to and including termination of employment.

Signature	Date
I authorize the School to contact anyone the information I have provided or to for past performance and suitability for employed all rights to bring any action for any similar claim against anyone who provided a good faith belief that the information the School may choose to obtain background consumer reporting agency. Before requesting agency, the School will ask for that if I refuse to provide such authors employment will not be considered.	urther investigate my background, ployment. I consent to being e School unless noted in writing and r defamation, invasion of privacy or ovides information to the School with provided is true. I understand that und information about me from a sting a report from a consumer or my authorization. I understand
Signature	Date
I understand that this Application for employment. I understand that nothing comployment creates a contract between the comployment creates a contract between the comployment of the contract between the comployment at any time for the contract between the contr	Employment is not an offer of ontained in this Application for he School and myself for employment ding employment have been made and I antee is binding upon the School. I e an employee "at will," meaning I am me and either I or the School can
Signature	Date