NORTHERN YORK COUNTY SCHOOL DISTRICT 650 S. BALTIMORE STREET DILLSBURG, PA 17019 717-432-8691 Ext.1104

SUPPORT STAFF APPLICATION

(Please Print)	Date:	Email Address:		
What Position are y	ou applying for?			
Name				
(last)	(first)	(middle initial)		
Address:				
(street)	(city)	(state)	(zip)	
Telephone:				
Do you have the leg	al right to live and work	in the United States	? Yes No	
Have you ever been	convicted of a misdemea	nor and/or a Felony?	? Yes No	
If Yes, please provid	le details			
Do you have a valid Date available?	Pennsylvania Driver's L	icense? Yes N	No	
Are you currently e	mployed?			
If so, where?				
Why are you applying	ng for a position with the	e school district?		

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EDUCATION

SCHO	OOL	CITY	<u>DATES ATTENDEI</u>
Elementary			
High School			
Education after Hi	gh School		
Number of years co	ompleted		
Degree Received _			
	WORI	K EXPERIENCE	
<u>COMPANY</u>	POSITION	SUPERVISOR	YEARS WORKED
1			
2			
3			
	REFERENC	ES (Do not use relatives)	
NAME	ADDRESS	<u>PH</u>	ONE
1			<u>.</u>
2	anar var		
3			
Please list any other	er information that woul	d be helpful in considerin	ng your application
•			
Applicant Signatur	ce		

The Northern York County School District is an equal opportunity educational institution and will not discriminate on the basis of race, color, religion, national origin, sex, or handicap in its activities, programs, or employment practices as required by Title VI, Title IX and Section 504 and the Americans with Disabilities Act.

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