

## MANHEIM TOWNSHIP SCHOOL DISTRICT P.O. BOX 5134 LANCASTER, PA 17606-5134

Phone: 717-569-8231 Fax: 717-569-3729

The Manheim Township School District, an equal opportunity employer, will not discriminate in employment, educational programs, or activities based on race, age, religion, national origin, sex, or disability. In addition, the Manheim Township High School, Middle School, Landis Run Intermediate School, Brecht, Bucher, Neff, Nitrauer, Reidenbaugh and Schaeffer Elementary Schools are accessible to and usable by the physically disabled. Inquiries should be referred to the Human Resource Department, who serves as coordinator for Title VI, IX, and 503/504 regulations. The telephone number is listed above for your reference.

	Date of Application:		
NAME:			
Last	First	M.I.	
ADDRESS:			
Street and/or Apt.	City	State Zip	
Telephone Number	Cell Number	Email Address	
Position(s) Applied For:			
Building Aide	Instructional Assistant	Security Monitors	
Clerical/Office Assistant	Library Assistant	Special Education Assistant	
Food Services	Maintenance/Custodia	Other:	
Health Room Nurse Assistant	Secretarial/Admin. Ass	sistant	
I am available to work: Full-Time	Part-Time	Substitute (on a day-to-day basis)	
Do you qualify for consideration under the Ve (If yes, a copy of form DD214 must be submitted w		Yes No 4 must be available upon request of the district.)	

**EMPLOYMENT RECORD:** (List below your employers, starting with last one first):

DATE – MONTH & YEAR	EMPLOYER NAME and ADDRESS	SALARY	<u>POSITION</u>	IMMEDIATE SUPERVISOR	REASON FOR LEAVING
From –					
То -					
From -					
To -					
From -					
То -					

## **EDUCATION RECORD:**

	GRADUATED Yes / No	NAME OF SCH	OOL	LOCATION OF SCHOOL
HIGH SCHOOL ATTENDED:				
TRADE SCHOOL				
BUSINESS SCHOOL				
COLLEGE				
SPECIAL TRAINING				
	e kept in the active	file for six months. It is t		g documents. Applicant is hereby at's responsibility to notify the district
May we contact your present employer? Yes No				
REFERENCES: List thre	e references, one	character and two supe	ervisors	
INDIVIDUAL'S NAI	ME ADI	ORESS-EMAIL ADDE	RESS	TELEPHONE NUMBER

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- I agree to abide by the policies and regulations of the Manheim Township School District and will notify the District promptly of any change of address or telephone number.
- I understand that I must submit a Report of PA Criminal Record (Act 34), a Child Abuse History (Act 151), a Federal Criminal History Record (Act 114), and a completed Arrest/Conviction Report and Certification Form (form PDE-6004) upon any offer of employment.
- I understand that I must submit a Sexual Misconduct/Abuse Disclosure Release Form (under Act 168 of 2014) for each current employer and previous employer(s) who are school entities and where I was employed in a position having direct contact with children prior to being employed by Manheim Township School District. I further understand that a school entity may not hire an applicant who does not provide the information required for the Sexual Misconduct/Abuse Disclosure Release Form (Act 168).
- I understand that a physical (Fit for Duty) examination which includes a tuberculin test (or chest x-ray) is required by the Pennsylvania School Code prior to employment.

- Successful candidates for the position must be able to perform the essential job functions with or without reasonable accommodation. It is the responsibility of the employee to inform the Director of Human Resources of any and all reasonable accommodations that will be required.
- I authorize investigation of all statements contained in this application, and I certify that any and all information which I have set forth in this application is true and accurate to the best of my knowledge.
- I recognize that misrepresentation or omission of facts requested is cause for dismissal.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my
personnel records, and to respond fully and completely to all questions that officials may ask regarding my prior
work history and performance. I will hold such previous employers and/or supervisors harmless of any and all
claims that I might otherwise have against them with regard to statements made to this school district. I further
authorize these officials to investigate my background, now or in the future, to verify the information provided
and release from liability all persons and/or entities supplying information regarding my background. However, I
do not waive any rights which I may have under state or federal law related to my right to challenge the
disclosure of unlawful or inaccurate information.

DATE	SIGNATURE