

**River City Education Organization  
dba San Jose Schools  
4072 Sunbeam Road  
Jacksonville, FL 32257  
PH(904)425-1725 FAX(904)683-9101  
APPLICATION FOR EMPLOYMENT**

**PERSONNEL**

[Please Print or Type]

Date of Application \_\_\_\_\_ Phone Number \_\_\_\_\_ U.S. Citizen Yes \_\_\_ No \_\_\_

Name

\_\_\_\_\_  
(Last) (First) (Middle)

Address

\_\_\_\_\_  
(No.) (Street) (City) (State) (Zip)

Position(s) applied for \_\_\_\_\_ Full Time or Part Time \_\_\_\_\_

Have you worked for us before? \_\_\_\_\_ If YES, when and position? \_\_\_\_\_

Indicate special qualifications or skills \_\_\_\_\_

NOTE: The items below are voluntary and are collected for Equal Employment Opportunities and for record keeping only, not for employment decisions.

Date of Birth: \_\_\_\_\_ Gender: \_\_\_ Male \_\_\_ Female

Ethnic Identification: Hispanic/Latino \_\_\_ Yes \_\_\_ No

Race: \_\_\_ White, Non-Hispanic \_\_\_ Black/African American \_\_\_ Hispanic \_\_\_ Asian  
\_\_\_ Native Hawaiian or Other Pacific Islander \_\_\_ American Indian/Alaskan Native

**BACKGROUND INFORMATION**

Are you a U.S. Citizen? \_\_\_\_\_ If NO, can you legally remain permanently in the U.S.? \_\_\_\_\_

Have you ever been bonded in prior employment? \_\_\_\_\_

If yes list names of employer(s): \_\_\_\_\_

Have you ever been convicted of a Felony or a first degree misdemeanor? \_\_\_\_\_

If YES, list convictions: \_\_\_\_\_

Have you ever received Workers Compensation benefits and if YES when? \_\_\_\_\_

Type of Injury? \_\_\_\_\_

Do you have a disability which would limit or prohibit you from performing the work for which you have applied and if so explain?

\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

NAME & LOCATION OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATE
Elementary			
High School			
College	Major and Degree		
Other			

**EMPLOYMENT RECORD (Begin With Most Current Job)**

Employer	Phone	From	To
Address		Position	
		Supervisor's Name	
Duties		Starting Salary/Wages	
		Final Salary/Wages	
Reason for Leaving			

Employer	Phone	From	To
Address		Position	
		Supervisor's Name	
Duties		Starting Salary/Wages	
		Final Salary/Wages	
Reason for Leaving			

Employer	Phone	From	To
Address		Position	
		Supervisor's Name	
Duties		Starting Salary/Wages	
		Final Salary/Wages	
Reason for Leaving			

**PROFESSIONAL REFERENCES**

Name	Email Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

**CERTIFICATION/LICENSURE [EX. Drivers License, Teacher Certification, etc.]**

Application Date or Certification No. \_\_\_\_\_ (Attach Copy)

Type \_\_\_\_\_ Expiration Date \_\_\_\_\_

Subjects Covered: \_\_\_\_\_

Drivers License: State \_\_\_\_\_ Type \_\_\_\_\_ No. \_\_\_\_\_ Exp Date \_\_\_\_\_  
(Attach Copy)

To be eligible for employment with River City Education Organization, Inc. you will be required to submit a complete set of fingerprints for background check purposes. The fingerprint process is conducted by DCPS and you may not be on campus until you are cleared by DCPS. New employees will be on probationary status pending fingerprint processing and determination of compliance with standards of good moral character. New employees will remain on probation for a period of 90 days thereafter and will remain in such status until notified in writing.

I hereby certify that, to the best of my knowledge and belief, the answers made herein are true. I understand that provision of any false or misleading information is sufficient grounds for immediate dismissal.

\_\_\_\_\_  
Signature of Applicant Date

*If you need any special accommodations, please contact the School to which you are applying.  
Federal and State Laws require that all applications be considered without regard to basis of ethnicity, gender, marital status, disability, age or religion.*