



HIGH MOUNT SCHOOL DISTRICT 116
1721 Boul Ave.
Swansea, Illinois 62226
618-233-1054

EMPLOYMENT APPLICATION

DATE _____

POSITION DESIRED: _____

NAME: _____ **SS#** _____
(LAST) (FIRST) (MIDDLE)

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

PHONE: _____
(HOME) (CELL)

EMAIL ADDRESS (optional): _____

JOB EXPERIENCE:

- 1) _____
- 2) _____
- 3) _____

REFERENCES:

- 1) _____
- 2) _____
- 3) _____

Are you currently employed? _____
If yes, please provide name of employer: _____

I understand that the information I have provided is accurate and that no information was given under false pretenses.

(SIGNATURE)

The best time to call to arrange an appointment: _____