



# General Application For Service Personnel

Logan County Schools

506 Holly Avenue

P.O. Box 477

Logan, WV 25601

(304) 792-2059 FAX (304) 792-6299

*The Logan County Board of Education is an Equal Opportunity Employer.*

This application must be complete and accurate. Applications are maintained for **12 months**. If you are interested in employment after that time, you must notify the Personnel Office that you want your application to remain active for another 12 months. **An updated résumé must be submitted.**

### -----Personal Data-----

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_

Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_ Are you a United States citizen? Yes \_\_\_ No \_\_\_

Do you have any physical limitations that would affect your ability to perform the functions of the job(s) for which you have applied? Yes \_\_\_ No \_\_\_ If "yes", please identify the limitations. \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor (excluding minor traffic citations)? Yes \_\_\_ No \_\_\_  
If "yes", a copy of relevant court documentation must be submitted.

Are you currently under indictment for a felony? Yes \_\_\_ No \_\_\_ If "yes", documentation related to the indictment must be submitted.

### -----Position(s) for Which You Are Applying-----

Please identify the position(s) for which you wish to be considered.

- |  |                                      |                                      |
|--|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Accountant                              | <input type="checkbox"/> Cook        | <input type="checkbox"/> Mechanic    |
| <input type="checkbox"/> Aide/Early Childhood Teaching Assistant | <input type="checkbox"/> Custodian   | <input type="checkbox"/> Secretary   |
| <input type="checkbox"/> Bus Operator                            | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Other _____ |

#### Notice of Nondiscrimination

Applicants for employment are hereby notified that the Logan County Board of Education supports equal employment opportunity. The Board's policies, rules and regulations shall be applied without regard to race, color, creed, national origin, gender, marital status, age, disability, genetic information, or membership in any employee organization.

### -----Education-----

Level	Name of School Attended	Location	Dates Attended	Degree, Diploma or Number of Credits Received

**A copy of the high school diploma, GED or TASC must accompany this application.  
Official transcripts from all colleges/universities attended must also accompany this application.**

**-----Work Experience-----**

Name of Organization	Location	Position	Dates		Supervisor
			From	To	

**-----Miscellaneous-----**

If applicable, why did you leave your last position? \_\_\_\_\_  
 \_\_\_\_\_

Why do you wish to be employed by Logan County Schools? \_\_\_\_\_  
 \_\_\_\_\_

**-----References-----**

Please provide the name of supervisors under whom you served.

Name	Address	Position

**-----Affirmation and Signature-----**

I swear or affirm, under the penalty of perjury, that all information provided on or with this application is true, correct and complete to the best of my knowledge. I understand that any false statements, misrepresentations or omissions of fact on or with this application may result in my ineligibility for employment or dismissal.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_