



Application for Employment

Loudoun Country Day School is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, religion, sex, age, national origin, ancestry, nationality, sexual orientation, veteran status, marital status, disability, or any other category to the extent protected by applicable law.

PERSONAL

Last Name		First Name		Middle Name	
Street Address		City		State	Zip
Home Phone	Other Phone	Email Address			
Position Sought (specify full or part time)		Salary Desired		Date Available	
Have you ever been employed by Loudoun Country Day School? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No					

EDUCATION – A resume can be submitted in lieu of this section, provided this information is on the resume.

Most Recent College/University	City	State	Dates Attended
Degree Attained & Major (or credits earned toward a degree)			GPA
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Degree Attained & Major (or credits earned toward a degree)			GPA

EXPERIENCE – A resume can be submitted in lieu of this section, provided this information is on the resume.

Most Recent Employer	City	State	Dates Employed
Position(s) Held			Reason for leaving
Responsibilities			
Employer	City	State	Dates Employed
Position(s) Held			Reason for leaving
Responsibilities			
Employer	City	State	Dates Employed
Position(s) Held			Reason for leaving
Responsibilities			
Employer	City	State	Dates Employed
Position(s) Held			Reason for leaving
Responsibilities			
Please explain any gaps in work history			

SKILLS and ACHIEVEMENTS

Describe any beneficial certifications, licenses, training, technological expertise, skills, experiences, and achievements.
Would you be interested in after-school coaching if the opportunity arose? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a commercial driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No
Would you be interested in offering an after-school program if the opportunity arose? <input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES

Name	Best Phone Number or Email	Alternate Phone or Email
Connection to applicant		
Name	Best Phone Number or Email	Alternate Phone or Email
Connection to applicant		
Name	Best Phone Number or Email	Alternate Phone or Email
Connection to applicant		

RECORD OF CONVICTION

Have you ever been convicted of a crime other than a minor traffic offense? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, explain:

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Loudoun County Day School (LCDS) to verify their accuracy and to obtain reference information from prior employers and other persons listed on my application. I understand that false, misleading, or omitted information provided or not provided in my application or during the interview process may result in a refusal to hire, or discharge in the event of employment.

I authorize LCDS to make any investigation it considers appropriate concerning my application for employment, including without limitation, soliciting information that may be required for an employment decision from any person, school, employer or other organization identified in this application. I authorize my prior employers and other persons listed in this application to provide LCDS any and all information requested concerning my application, work, character and qualifications that may be requested. I hereby release LCDS from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that employment at LCDS is contingent upon results of background and fingerprint checks and any other requirements under applicable law. I further authorize the release to LCDS of the results of all such tests performed, and I authorize the use of such information by LCDS for any lawful purpose.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create or imply an offer of employment or an employment contract between LCDS and myself. I understand I shall be required to provide documentation establishing my legal authorization for employment within the first three (3) business days of commencing work, as required by the Immigration Reform and Control Act of 1986. I understand that if employed, my employment will be at will and that I will not have a guarantee of employment.

Signature of Applicant	Date
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