**Application for Non-Certified Employment**

**Greene-Sullivan Special Education Cooperative**

**77 A Street Northeast, Linton, IN 47441 (812) 847-8497**

|  |  |  |
| --- | --- | --- |
| Name: | Date: | Phone: |
| E-Mail: | Address: | City/State/Zip: |

**The information contained in the following box will be used for the mandatory for background check.**

|  |  |
| --- | --- |
| SSN: | DOB: |

|  |
| --- |
| High School: Graduation Date: |
| Other Schooling: |
|  |
|  |

**Work Experience**

|  |  |  |
| --- | --- | --- |
| Company: | Name of Last Supervisor: | Hrs./Week |
| Address: | Start Date-End Date |  |
| Phone Number: | Last Job Title:  |  |
| Reason for leaving(be specific): |  |  |
|  |  |  |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: |  |  |
| May we contact this employer?        |  Yes           No |  |

|  |  |  |
| --- | --- | --- |
| Company: | Name of Last Supervisor: | Hrs/Week |
| Address: | Start Date-End Date |  |
| Phone Number: | Last Job Title:  |  |
| Reason for leaving(be specific): |  |  |
|  |  |  |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: |  |  |
| May we contact this employer?        |  Yes           No |  |

**References (Please include personal & professional references)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Person/ Position** | **Phone Number** | **Address** | **Business/School** |
|  |  |  |  |
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| --- |
| **Signature: Date:** |