Central Region
School Insurance Group

1120 Tully Road
Modesto, CA 95350

Phone: (209) 579-7535
Fax: (209) 579-7530

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: **( )** _____ E-mail Address: _____

Date Available to start: _____ Preference: Full-Time ☐ Part-Time ☐

Position Applying for:: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? _____

Have you ever been convicted of a felony? YES ☐ NO ☐ If yes, explain: _____

Can you travel within the CRSIG region if required? YES ☐ NO ☐ Do you have a valid California Driver's License? YES ☐ NO ☐

Do you have any physical conditions that may limit your ability to perform the job you are applying for? YES ☐ NO ☐

If yes, what can be done to accommodate your limitation:

Education

High School: _____ Address: _____

From:	To:	Did you graduate? YES ☐ NO ☐	Degree:

College: _____ Address: _____

From:	To:	Did you graduate? YES ☐ NO ☐	Degree:

Other: _____ Address: _____

Describe specific training:

From:	To:	Did you graduate? YES ☐ NO ☐	Degree/ Certificate:

Typing: wpm _____ Other types of office equipment you are proficient in operating: _____

What types of computer applications can you use? _____

References

Please list two professional and one personal references.

Name: _____ Relationship: _____ Email: _____ Phone: _____

Name: _____ Relationship: _____ Email: _____ Phone: _____

Name: _____ Relationship: _____ Email: _____ Phone: _____

Previous Employment

Employer: _____ Phone: ( ) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $ _____ Ending Salary: $ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ Comment:

Employer: _____ Phone: ( ) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $ _____ Ending Salary: $ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ Comment:

Employer: _____ Phone: ( ) _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $ _____ Ending Salary: $ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐ Comment: _____

If you would like additional employment to be considered, please attach a resume to this application.

Special Skills & Qualifications

State briefly why you feel you are the best candidate for the position:

Disclaimer and Signature

My signature below authorizes the Central Region School Insurance Group (CRSIG) to conduct a background investigation and authorizes release of all information in connection with my application for employment. Further, I hold harmless any individual or firm for any information that they may provide in this investigation which may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal and professional references and other appropriate sources. I waive my right of access to any such information and without limitation, hereby release the CRSIG and the reference source from any and all liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: law enforcement agencies and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct, and complete answers on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or false answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the CRSIG.

CONDITION OF EMPLOYMENT: Candidates selected may be required to furnish a TB clearance, pre-employment physical examination and pass a drug test and fingerprint clearance through the Department of Justice.

Signature: _____ Date: _____