

MARSH VALLEY SCHOOL DISTRICT NO. 21
CLASSIFIED EMPLOYEE APPLICATION

Social Security Number SS# _____ Date: _____

Name: _____
(Last name) (First name) (Middle)

Present Address: _____

Phone number: _____

School Attended

Name & Location	Date	Degree / Diploma	Major Field	Minor Field

Position for which you are Applying: _____

EMPLOYMENT HISTORY

Name of Employer	Location	Description	Date

Professional and Civic Organizations and Activities: _____

Area's where you are qualified to Work: _____

REFERENCES

NAME	ADDRESS	OFFICIAL POSITION	PHONE NUMBER

SIGNATURE OF APPLICANT _____

DATE _____

Return this application to Superintendent's Office:

Marsh Valley School District #21
P.O. Box 180
Arimo, Idaho 83214