



# FORT DALE ACADEMY

Position Information	Title of position for which you are applying: _____		
			Date of Application

Personal Information	Last Name		First Name		Middle Initial	
	Address			City	State	ZIP
	Contact Information					
	Phone	Home	Work	Cell	E-mail Address	

Secondary and Postsecondary Education		School/College	Dates Attended From/To		Major	Minor	Degree(s) Earned
	High School/ GED						
	College						
	College						
	College						
	Other (Specify)						

Employment History	Please list most recent employment experience first.		
	Employer	Telephone Number	Job Duties
	Address	Dates of Employment	
	Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
	Reason for Leaving		

**Employment History (Continued)**

Employer	Telephone Number	Job Duties
Address	Dates of Employment	
Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
Reason for Leaving		
Employer	Telephone Number	Job Duties
Address	Dates of Employment	
Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
Reason for Leaving		
Employer	Telephone Number	Job Duties
Address	Dates of Employment	
Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
Reason for Leaving		
Employer	Telephone Number	Job Duties
Address	Dates of Employment	
Title <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Hourly Rate/Salary	
Reason for Leaving		

May we contact your current employer?

☐

Yes

☐

No

**Skills, Awards,  
Certificates or  
Professional Activities**

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**Note: Please provide details of each. May use a separate sheet if necessary.**

**References**

Please list three references, other than relatives, who can provide information verifying qualifications, character, or work experience.

Name and Title	Address	Phone Number

**Felony  
Conviction(s)**

Have you ever been convicted of or pled no contest or guilty to any felony or any crime involving theft, dishonesty, violence, or sexual misconduct? ☐ Yes ☐ No

If yes, explain below:

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Signature of Applicant

Date