



Frenchtown Elementary School
902 Harrison Street
Frenchtown, NJ 08825
Telephone (908) 996 – 2751

NON-PROFESSIONAL APPLICATION FOR: Aide Custodian Secretary Substitute

P E R S O N A L	NAME: _____ SOCIAL SECURITY #: _____			
	ADDRESS: _____			
	CITY	STATE	ZIP CODE	
	HOME TELEPHONE: _____		BUSINESS TELEPHONE: _____	
	DATE OF BIRTH: _____		CERTIFICATION HELD: _____	
	AVAILABILITY: _____		PRESENT SALARY: _____	
E D U C A T I O N	SCHOOL	NAME AND LOCATION	DATES	YRS. COMPLETE
	Elementary			
	High School			
	College			
	Other			
E M P L O Y M E N T	EMPLOYER & ADDRESS		JOB TITLE	DATES
	1. _____			
	2. _____			
	3. _____			
	4. _____			
	5. _____			
	6. _____			

We may contact the employers listed unless you indicate those you do not want us to contact.

Employer Number(s) _____

Reason: _____

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ARE YOU A VETERAN? _____ BRANCH OF SERVICE:

PERIOD OF ACTIVE DUTY: _____ DISCHARGE DATE:

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Give references who have first hand knowledge of your character, personality, scholarship, and teaching ability.

- 1. NAME: _____ TITLE: _____
ADDRESS: _____ TELEPHONE: _____
- 2. NAME: _____ TITLE: _____
ADDRESS: _____ TELEPHONE: _____
- 3. NAME: _____ TITLE: _____
ADDRESS: _____ TELEPHONE: _____

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I hereby certify, under penalty of perjury, that I have not been convicted of any crime or disorderly persons offense involving sexual offenses, child molestation, or endangering the welfare of children or incompetents, arson, robbery, assault, kidnapping, murder, manslaughter or violations of the Controlled Dangerous Substance Act.

SIGNATURE

DATE

PLEASE ATTACH A COPY OF YOUR CRIMINAL HISTORY REVIEW CERTIFICATION.

RETURN TO:

**Office of the Superintendent
Frenchtown Elementary School
902 Harrison Street
Frenchtown, New Jersey 08825**

An Equal Opportunity Employer