

Causeway Academy

430 Jamestown Avenue
Portsmouth, VA 23704
Telephone: (757) 401-5444

Date: _____

General Information

Name: _____

Social Security#: _____

Home Address: _____
Street

_____ City State Zip

Phone Number: (_ _) _____

Position Applied For: _____ Date Available: _____
 Full-time Part-time Temporary Permanent

Education Information

Major Studies Degree/Diploma/License or Certificate (list type and date)

High School: _____

Vocational/Business/Other: _____

College/University: _____

Graduate: _____

Other special skills/knowledge/qualifications: _____

Employment History

List all employers, starting with the most recent position. All information must be completed. You may attach a resume with this information if desired.

Most Recent Employer

Is this your current employer? YES No

May we contact this employer for references? YES No

Employed from _____ Employed to _____

Job Title _____

Employer Name: _____ Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Job Duties and Responsibilities: _____

Reason for Leaving: _____

Next most recent Employer

Employed from _____ Employed to _____

Job Title _____

Employer Name: _____ Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Job Duties and Responsibilities: _____

Reason for Leaving: _____

Next most recent Employer

Employed from _____ Employed to _____

Job Title _____

Employer Name: _____ Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Job Duties and Responsibilities: _____

Reason for Leaving: _____

Additional References:

Name/Phone Number

Name/Phone Number

Volunteer Activities: (list organization, type of service and dates) _____

Hobbies/Interests (optional) _____

Certification and Authorization

The above information is true and correct. I authorize Causeway Academy to inquire into my education, past employment history, and references as needed to research my qualifications for this position.

I hereby acknowledge that I have read and agree to the above statements.

Signature _____ Date _____