

**COLD SPRING SCHOOL DISTRICT**  
2243 Sycamore Canyon Road  
Santa Barbara, CA 93108  
Phone (805) 969-2678 Fax (805) 969-0787  
Email: [Office@coldspringschool.net](mailto:Office@coldspringschool.net)

**CLASSIFIED APPLICATION FOR EMPLOYMENT**

**POSITION APPLIED FOR:** \_\_\_\_\_

Name: \_\_\_\_\_  
*(First) (Last) (Middle)*

Address: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*

Phone Number: (\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

**INTERESTED IN:**

Fulltime     Part Time     Summer     Substitute

Driver's License # \_\_\_\_\_

U.S. Citizen?  Yes  No      Date you can begin work: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
*(Name, First and last) (phone) (relationship)*

Address: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*

Are you or have you ever been a member of the Public Employees Retirement System?

No       Yes      If Yes, date you became a member: \_\_\_\_\_

**EDUCATION:** Highest grade completed \_\_\_\_\_ Did you receive a high school diploma?  No  Yes

Name of High School: \_\_\_\_\_  
*(Name of High School) (City) (State)*

List Colleges or other Special Training Below

\_\_\_\_\_  
*(Name of School) (Dates) (Degree)*

\_\_\_\_\_  
*(Name of School) (Dates) (Degree)*

\_\_\_\_\_  
*(Name of School) (Dates) (Degree)*

\_\_\_\_\_  
*(Name of School) (Dates) (Degree)*

\_\_\_\_\_  
*(Name of School) (Dates) (Degree)*

**EXPERIENCE: Begin with the most recent position. Also, list significant volunteer work.**

**Company Name:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Address: \_\_\_\_\_  
*(Street) (City) (State) (Zip)*

Title/Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ May we contact? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Duties:

**Company Name:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Title/Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ May we contact? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Duties:  
\_\_\_\_\_

**Company Name:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Title/Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ May we contact? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Duties:  
\_\_\_\_\_

**Company Name:** \_\_\_\_\_ **From:** \_\_\_\_\_ **To:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Title/Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ May we contact? \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Duties:  
\_\_\_\_\_

**SKILLS:**

PC? \_\_\_\_\_ MAC? \_\_\_\_\_ Typing? \_\_\_\_\_ Other \_\_\_\_\_

**LIST NAME, ADDRESS AND TELEPHONE NUMBER OF TWO REFERENCES OTHER THAN RELATIVES:**

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

CERTIFICATE OF APPLICANT: *I certify that all statements made in this application are true and complete to the best of my knowledge. I understand that any false statement of material facts may subject me to disqualification or dismissal.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date