

**EMPLOYMENT APPLICATION**  
**THE PATHWAY SCHOOL**  
 162 Egypt Road  
 Norristown, PA 19403

The Pathway School is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected by law.

Position(s) Applied For	Date of Application
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Last Name	First Name	Middle Name
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Address	City	State	Zip Code
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Telephone Number	Cell Number
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E-mail address \_\_\_\_\_

Are you a resident of Pennsylvania? Yes \_\_\_\_\_ If yes length of residency \_\_\_\_\_ No \_\_\_\_\_

How Did You Hear About Us?  
 Newspaper Ad  Employment Agency  Current Employee \_\_\_\_\_  
 Other \_\_\_\_\_

Are you legally eligible to work in the United States? YES [ ] NO [ ]

*(Proof of eligibility will be required upon offer of employment)*

Are you over the age of 18 years? YES [ ] NO [ ]

*(If no, you may be required to provide authorization)*

Can you with or without reasonable accommodation perform the essential functions of this job? *(If you have any questions about the functions of the job, please ask the interviewer before answering this question.)* YES [ ] NO [ ]

Have you ever applied to Pathway School before? *(If yes, please give date.)* \_\_\_\_\_ YES [ ] NO [ ]

Have you ever worked for Pathway School before? *(If yes, please give date.)* \_\_\_\_\_ YES [ ] NO [ ]

Have you ever been convicted of a felony? *(A conviction will not necessarily disqualify you.)* YES [ ] NO [ ]

If yes, please explain: \_\_\_\_\_

Do you have a valid driver's license? *(For driving positions only.)* YES [ ] NO [ ]

Have you been convicted of any moving violations in the past five years? YES [ ] NO [ ]

If yes, please explain: \_\_\_\_\_

Is anyone related to you employed by Pathway School? YES [ ] NO [ ]

If yes, please give their name and relationship to you. \_\_\_\_\_

Have you ever been fired or asked to resign from a job? YES [ ] NO [ ]

If yes, please explain. \_\_\_\_\_

On what date would you be available to begin work? \_\_\_\_\_

**EDUCATION**

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/Degree
<b>Elementary</b>				
<b>High School</b>				
<b>College</b>				
<b>Graduate</b>				
<b>Vocational</b>				

Please list any academic honors, scholarships, offices held, etc. *(Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities or veteran status.)*

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Do you hold a valid teaching certificate? YES [ ] NO [ ] If yes, from which state(s)? \_\_\_\_\_

List areas of certification: \_\_\_\_\_

Describe any specialized training, apprenticeships, certificates, licenses or skills.

Have you received any job-related training in the United States Military? YES [ ] NO [ ]  
Please give dates and explanation:

**EMPLOYMENT HISTORY** *(Begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at Pathway School.)*

Company Name	Employment Dates		Salary		Name and Title of Supervisor
	From	To	Start	End	
Address			\$	\$	
	<b>Describe your duties:</b>				
Phone					
<b>Reason for leaving and explanation</b>					

<b>Company Name</b>	<b>Employment Dates</b> From      To	<b>Salary</b> Start   End	<b>Name and Title of Supervisor</b>
<b>Address</b>		\$      \$	
	<b>Describe your duties:</b>		
<b>Phone</b>			
<b>Reason for leaving and explanation</b>			
<b>Company Name</b>	<b>Employment Dates</b> From      To	<b>Salary</b> Start   End	<b>Name and Title of Supervisor</b>
<b>Address</b>		\$      \$	
	<b>Describe your duties:</b>		
<b>Phone</b>			
<b>Reason for leaving and explanation</b>			
<b>Company Name</b>	<b>Employment Dates</b> From      To	<b>Salary</b> Start   End	<b>Name and Title of Supervisor</b>
<b>Address</b>		\$      \$	
	<b>Describe your duties:</b>		
<b>Phone</b>			
<b>Reason for leaving and explanation</b>			

Please provide any other information that you feel will help us in considering your application for employment.

**REFERENCES (Please list a minimum of three professional references)**

<b>Name</b>	<b>Address</b>	<b>Phone Number</b>	<b>Relationship/Occupation</b>	<b>Years Known</b>

**APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION**

**\*PLEASE READ CAREFULLY BEFORE SIGNING\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Pathway School that during the probationary period my employment and compensation could be terminated with or without cause, at any time. I understand that none of the documents, policies, procedures, actions, statements of Pathway School or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of the school except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President.

In consideration for employment with Pathway School, if employed, I agree to conform to the rules, regulations, policies and procedures of The Pathway School at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Pathway School's business, attendance and punctuality are considered essential requirements of every job at Pathway School and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with Pathway School, I will be required to submit to a pre-employment medical examination, TB, drug screening and background checks as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Pathway School and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.**

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**PATHWAY SCHOOL IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.**