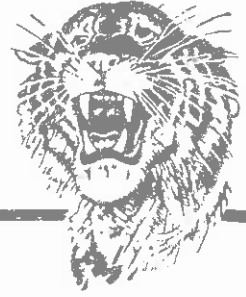


MOON AREA SCHOOL DISTRICT



An Equal Opportunity Employer

TEACHER AIDE APPLICATION

TO APPLICANT: We deeply appreciate your interest in the Moon Area Schools, and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and educational history will aid us in placing you in the position that best meets your qualifications. Send your completed application to the above address. In the event an opening occurs for which your competencies and experience can be utilized, arrangements will be made for a personal interview.

I. Name _____ Date _____

Application for the position of _____

Home Address _____

Telephone Number _____ Social Security Number _____

II. Work Experience: – List last three places you have been employed:

| Place of Employment | Dates of Employment | Salary Received | Type of Work |
|---------------------|---------------------|-----------------|--------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |

III. Education: – List below the school level you have completed.

Elementary _____

High School _____

Others _____

Complete information requested on reverse side

IV. References: – These should be people able to answer questions concerning your experience and your abilities to do this job.

| Name | Occupation | Address |
|----------|------------|---------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |

V. Indicate below specific experiences you have had.

| Check Here | Type of Experience | Yrs. | Mo. | Check Here | Type of Experience | Yrs. | Mo. | Check Here | Type of Experience | Yrs. | Mo. |
|------------|---------------------------|------|-----|------------|----------------------------|------|-----|------------|--------------------------|------|-----|
| | Addressograph Operator | | | | Confidential Secretary | | | | Office Boy/Girl | | |
| | Blue Print Mach. Operator | | | | Dictating Mach. Transcpt. | | | | Office Supervisor | | |
| | Clerical Supervisor | | | | Key Punch Operator | | | | Photostat Operator | | |
| | Clerk | | | | Mail Clerk | | | | Receptionist | | |
| | Correspondence | | | | Duplicating Mach. Operator | | | | Secretary | | |
| | Cost | | | | Ditto | | | | Telephone Swbd. Operator | | |
| | File | | | | Mimeograph | | | | Teletype Operator | | |
| | General | | | | Multigraph | | | | Timekeeper | | |
| | Statistical | | | | Multilith | | | | | | |
| | Stock | | | | Other | | | | | | |

VI. Indicate below your office skills and check office machines you can operate efficiently.

| | | | |
|-------------------------|---------------------------------|--------------------------|------------------|
| ___ Typewriter | Speed in Typing _____ | ___ Billing Machine | Which Ones _____ |
| ___ Electric Typewriter | Speed in Typing _____ | ___ Bookkeeping Machines | Which Ones _____ |
| ___ Vari-Type | Speed in Typing _____ | ___ Accounting Machine | Which Ones _____ |
| ___ Shorthand | Speed in Dictation _____ | ___ Calculating Machine | Which Ones _____ |
| ___ Stenotype | Speed in Taking Dictation _____ | ___ Tabulating Machine | Which Ones _____ |

VII. Other information regarding talents and/or experiences that would aid you in your employment.

All applicants who are residents of the Commonwealth of Pennsylvania must submit with their employment application, a Criminal History Record from the Pennsylvania State Police. All applicants who are not a resident of the Commonwealth of Pennsylvania or have not been a resident of the Commonwealth of Pennsylvania for at least one (1) year prior to the filing of this application, must submit a Federal Criminal Record History from the Federal Bureau of Investigation; based upon the guidelines as outlined by the Pennsylvania Department of Education. The Moon Area School District will notify, in writing, any applicant who has been rejected for employment where rejection is based on whole or in part, upon the Criminal History Record Information provided. The applicant further authorizes the Moon Area School District to conduct whatever investigation is necessary.

I hereby authorize investigation of all statements contained in the application. I further authorize investigation and review with regard to my Criminal History Record Information. I understand that any misrepresentation or omission of facts from this application will be cause for rejection and/or dismissal.

Date: _____ Signature: _____

The Moon Area School District is an equal opportunity employer in conformance with Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 and Section 504 of the Rehabilitation Act of 1973.

*Moon Area School District
8353 University Boulevard
Moon Township, PA 15108
412-264-9440*