

**Boaz City Schools**  
126 Newt Parker Drive  
Boaz, AL 35957  
(256) 593-8180  
(256) 593-8181 Fax

## EXTENDED DAY APPLICATION

Name \_\_\_\_\_  
First M Last

Address \_\_\_\_\_  
Street or P. O. Box City State Zip

Social Security No. \_\_\_\_\_ Phone Number \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? ☐ Yes ☐ No If yes, explain: \_\_\_\_\_

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Are you presently working in the Boaz City School System? ☐ Yes ☐ No If yes, stop here except for your signature and the date on the back.

Have you previously worked in the Boaz City School System ☐ Yes ☐ No If yes, in what status  
Regular Teacher ☐ Aide ☐ Other \_\_\_\_\_

### EDUCATION

	NAME OF SCHOOL	AREA OF STUDY	DEGREE	YEAR OF GRADUATION	YEARS SPENT
High School					
Jr. College		Major			
		Minor			
University		Major			
		Minor			
Graduate Work					

**FORMER EMPLOYERS: (List below last four employers, starting with last one first)**

<b>Date Month / Year</b>	<b>Name &amp; Address Of Employer</b>	<b>Type of Work</b>	<b>No. of Years</b>	<b>Reason for Leaving</b>
From      To				
From      To				
From      To				
From      To				

**REFERENCES**

<b>NAME</b>	<b>POSITION</b>	<b>ADDRESS &amp; PHONE NO.</b>
1.		
2.		
3.		
4.		

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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**FOR OFFICE USE ONLY**

**Results of Reference Check:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Date Employed** \_\_\_\_\_

**Position** \_\_\_\_\_

**NOTE: Any false information knowingly given on this application is grounds for dismissal.**

It is the policy of the Boaz City School System that no person shall be denied employment, be excluded from participation in, be denied the benefits of, or subjected to discrimination in any program or activity on the basis of sex, race, religion, handicap, belief, national origin, age, or ethnic group.