



EMPLOYMENT APPLICATION

PERSONAL INF	ORMATION								
Applicant's Name:					Title: Mr. Mrs. Miss				
Birthdate: Day Month Year			Social Security No:						
Passport No:		Date of issue	e: Day	Month Year	Date of expi	re: Month Year			
Permanent address									
(Street, city, state, zip)				Zip:					
Permanent Phone	·		Permane	ent phone val	id through				
Email:									
EMERGENCY II	FORMATIO	N							
Who should be cor			?						
Name:				Relationshi	p:				
Permanent address			'						
(Street, city, state, zip)						Zip:			
Permanent Phone	•								
Email:									
Education									
	high school g	raduate and g	raduated	d in (vear)					
	university stu		,						
	- What year are studying now								
-	- What major are you studying								
You are	What is the	name of the	universit	y are you s	tudying right	now?			
	graduate. What year	did you gradu	ıate?						
-	What major did you graduate?								
-	What is the	name of the	universit	ty did you g	graduate?				
Foreign language	proticiency (If	any)							



Education (Cont	inue)						
	Name:						
High School	Address:						
	Course of Study:						
	Total Years of study:						
	Diploma						
Undergraduate	Name:						
	Address:						
	Course of Study:						
	Total Years of study:						
	Degree						
Graduate or Professional	Name:						
Tioressional	Address:						
	Course of Study:						
	Total Years of study:						
	Degree						
Other (Specify)	Name:						
	Address:						
	Course of Study:						
	Total Years of study:						
	Degree						
List any seminar position.	rs, classes or other education not listed above which may help qualify you for this						
1 -							
2 -							
3 -							
4 -							



Please list below all p									/ear	s, start	ting v	with :	you	ır m	ost	recent
employer. If you don't		7 1			istory, please t	1CK	here									
Employer Name (current	: <u>L</u>	No		Yes):												
Position:					Start date:	/	Month	1 Y	ear	End da	ate:	Day	/	Month	/	Year
Address (Street, city, state, zip)											Zip:					
Phone:				E	Email:											
	Name:				Phone No:											
Your supervisor	Your supervisor Emai															
Reason for leaving																
List your main duties i	n that	t com	pany:													
1-																
2-																
3-																
4-																
Employer Name:																
Position:					Start date:	/	Montl	n Y	ear	End d	late:	Day /	, M	lonth	/	l'ear
Address (Street, city, state, zip)																
(Bucci, etc), state, 21p)	L										Zip:					
Phone:				E	Email:											
Your supervisor	Nan								Pho	one No):					
•	Ema	ail:														
Reason for leaving	<u> </u>															
List your main duties i	n that	t com	pany:													
1-																
2-																
3-																
4-																



	EMPLOYMI	ENT DESIRE	ZD	
POSITION APPLIED FOR				
Date Available for work D	Day Month	Yea	ar	
2- What date can you arrive Car		Month	Year	
3- Grade level preference (Ran placement)	ık 1 to 5. 1 bein	g your first	choice. However we	don't guarantee
pracement)				
Kindergarten G	rade 1	Grade 2	Grade 3	
Grade 4	Grade 5	Grade 6		
Physical Science Bi Mathematics Pre Algebra Algebra 1 Geometry Algebra 2 Advance (more Scientif	chan one subjects) istory and Geogra iology fics) /Business Ma	aphy	General Science Health	e subject that you
4- Please describe below any spe	cial circumstance	es that may af	ffect your assignment.	
1 -				
2 -				
3 -				
4 -				
5 -				
	RELIGIOUS	AFFILIATI(ON	
Religion Christian B If you are not a Christian, please		ther, please spection.	pecify	
Denomination (If Christian)				
Where do you worship?				
Pastor's name:				



Do you object to ALIS to contacting t	o your pastor for a reference	e? Yes No				
H	Pastor's phone:					
How can we reach your pastor?	Pastor's email:					
Reason for coming to Cambodia						
1 -						
2 -						
3 -						
4 -						
AD	DITIONAL INFORMATIO	N				
1- Do you smoke? No Yes, I	How often do you smoke?					
2- Do you drink? No Yes, H	How often do you drink?					
3- Can you ride bicycle? No	Yes					
4- Can you swim? No Yes						
5- What sports do you play?						
6- What computer program can you use	?					
7- What music instrument can you play	?					
8- Have you ever been employed by ALIS If yes, When?	or Lifeline in Cambodia before	? No Yes				
9- Do you have any friends or relatives employed by ALIS?						
If yes, please provide their names and relation to you. Name:						
Relation:						
	REFERENCES					
List below three persons not related to y 5 years.	you who have knowledge of y	our work performance within the last				
1-Name		Occupation:				
Company name:						
Address:						
Phone Number:						
Email:						



Relationship & years acquainted:				
2-Name	Occupation:			
Company name:				
Address:				
Phone Number:				
Email:				
Relationship & years acquainted:				
3-Name	Occupation:			
Company name:				
Address:				
Phone Number:				
Email:				
Relationship & years acquainted:				
ADDITIONAL SPACE				
Additional space provided to expand on any points or questions asked previously in	this application			
1 -				
2 -				
3 -				
4 -				
5 -				
ALIS POLICY STATEMENT	S			
Equal Internship Opportunity Statement Abundant Life International School (ALIS) is committed to opportunity and is committed to make internship decisions bas complying with all laws providing for equal internship opportunitiand conditions of employment.	ed on merit. We are committed to			
Discrimination and Sexual Harassment Policy Statement ALIS will not tolerate any form of unlawful discrimination, employee who engages in unlawful discrimination or sexual hara discipline, up to and including termination. Prohibited sexual Unwelcome sexual advances, requests for sexual favors and other nature.	ssment will be subject to appropriate l harassment is defined as follows:			



Disclosure to Applicants Concerning Drug, Alcohol and Tobacco If you are offered a position with ALIS, it is expected that you do not use drugs, alcohol or tobacco. ALIS does not wish to subject the children in our schools to drugs, alcohol or tobacco and we will not allow our employees, who are role models for our children, to use same. Use of drugs, alcohol or tobacco will result in immediate termination of employment.
Complete and Accurate Information I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for internship and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure internship, shall be grounds for rejection of this application or for immediate discharge if I am accepted, regardless of the time elapsed before discovery.
Testing Authorization If offered a position with ALIS, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the ALIS as a condition of employment.
Investigation Authorization I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.
ALIS Obligation I understand and agree that the ALIS's acceptance of this application does not mean that a position for which I am qualified is open (unless specifically posted) or that the ALIS has agreed to hire me. I understand that the ALIS is under no obligation to hire me as the result of accepting this completed application.
I HAVE READ AND UNDERSTAND THE AFOREMENTIONED POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF ACCEPTED BY ABUNDANT LIFE INTERNATIONAL SCHOOL.
Day Month Year
Signature Date
Signature

Send Application

