

Business 10th

Mr. Armentrout

Packet 17-21

TO: All Families/Students
FROM: Dave Armentrout *Dave*
DATE: April 8, 2020
SUBJECT: IEP Modifications/Accommodations

Attached are copies of the Lesson 17-21 packets. If there are any questions regarding the lessons, please do not hesitate to send me an email at rarmentr@k12.wv.us or thru the Live Grades message center which can be accessed by clicking on the System Button and then the Message Center button. If your child receives any accommodations or modifications as indicated on his/her current IEP, remember to only complete the necessary part of the pack assignments according to those specifications.

Fill out the sample employment application providing information in all areas as best as you can. This is just a sample but you will be or are at an age when you can apply for jobs and many of you may want to work this summer so this is good practice for you. This is your packet for the entire week. I really miss you guys cutting up in class but don't think you are going to be able to do it when we return! LOL.....

Take care and be safe.

Mr. Armentrout



Employment Application

Name _____

Position _____

Date _____

Please Read The Following Before Completing Our Application:

- Completing the application does not guarantee a job offer or job interview.
- The application must be completely filled out in order for it to be considered.
- If the information provided on the application cannot be satisfactorily verified by employment reference, your application could be considered incomplete.
- Due to the large number of applications we receive and the competitive nature of our employment process, we will not release specific reasons for employment.
- By completing the application you will be subject to a CREDIT CHECK and EMPLOYMENT REFERENCE CHECK.

I have read and understand the above information: _____

Signature

Statement of Applicant:

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature _____

Date _____

PLEASE TYPE OR PRINT ALL RESPONSES

Position(s) Applied for		Date of Application	
How Did You Hear About Us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Relative	<input type="checkbox"/> Inquiry	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend	<input type="checkbox"/> Other _____	
Last Name	First Name	Middle Name	
Address	City	State	Zip
Telephone Number(s)		Social Security Number	

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate / Professional				
Other (Specify)				

List any specialized training, apprenticeship, skills and extra-curricular activities. Also summarize special job-related skills and qualifications acquired from employment or other experiences that are not listed elsewhere on this application.

Have you ever been in the military?

Yes

No

If yes, list any training received.

List any professional, trade, business, or civic activities and offices held.

You may exclude memberships which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Specialized skills

PC/MAC

Spreadsheet

Word Processing

Facsimile

Copier

Adding Machine

Typewriter WPM _____

Shorthand WPM _____

Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer		Dates Employed From To		Job Responsibilities
Address				
Telephone Number(s)		Hourly Rate/Salary Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed From To		Job Responsibilities
Address				
Telephone Number(s)		Hourly Rate/Salary Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed From To		Job Responsibilities
Address				
Telephone Number(s)		Hourly Rate/Salary Starting Final		
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed From To		Job Responsibilities
Address				
Telephone Number(s)		Hourly Rate/Salary Starting Final		
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, use an additional sheet of paper.

These are the only employers that I have had in the last 7 years:

Signature

Date

Additional Information

What is the best time to contact you at home? _____ AM / PM

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever been employed with us before? Yes No
If yes, give date ___ / ___ / ___

Do any of your friends or relatives (other than your spouse) work here? Yes No

May we contact your present employer? Yes No

Are you legally prevented from being employed in the United States of America because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration status will be required upon employment

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Date available to work: ___ / ___ / ___ Desired salary range: _____

Available to work: Full-Time Part-Time Temporary
Dates Available ___ / ___ / ___ to ___ / ___ / ___

References

Do not list relatives or former/current employees. List home phone and work phone.

Name	Telephone Number(s)
Address	
Name	Telephone Number(s)
Address	
Name	Telephone Number(s)
Address	
Name	Telephone Number(s)
Address	

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.