

Omar Haikal Islamic Academy
485 E Eldorado Lane
Las Vegas, NV 89123

Employment Application

Date: _____ Position Applying For: _____

BIOGRAPHICAL INFORMATION

Applicant's Name _____ SS# _____
(Last) (First) (Middle)

Date of Birth: _____

Present Address: _____
(Street) (City) (State) (Zip)

Permanent Address: _____
(Street) (City) (State) (Zip)

Home Phone: _____ Alternate Phone: _____

Emergency Phone: _____ Emergency Name: _____

Driver's License # _____ Issuing State: _____

Work Authorization: Check if US Citizen Permanent Resident: A# _____

ACADEMIC ANALYSIS

Major Field _____

Minor Field _____

CERTIFICATES HELD

Type	Endorsements	Number	State	Date Issued
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Office Use Only:
Interview Notes:

EDUCATION RECORD

College / University	Dates Attended	Degree	Date Conferred
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High School(s) Attended

WORK EXPERIENCE

Contractual Teaching Experience:

Name of District	Address	Phone	Principal or Supervisor	Position	Dates
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STUDENT TEACHING, INTERNSHIP, OR PRACTICUM

Name of school	Address	Phone	Supervising Teacher	Subject	Grade	Dates
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REFERENCES AND/OR PLACEMENT PAPERS

Name	Position / Title	Complete Address	Phone Number
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Office Use Only:
Interview Notes:

Have you ever been dismissed from any position for immoral or unprofessional conduct or for unfit service?

Yes No

Initials

Have you had a credential, certificate or license to teach denied, revoked or suspended?

Yes No

Initials

Have you ever been convicted of, plead no contest to or received a deferred sentence to a crime other than a minor traffic violation?

Yes No

Initials

If you answered yes to any of the above questions, please explain the circumstances in detail in the space provided. Please use a separate sheet of paper if necessary to give a complete explanation.'

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify the information contained in this application form to be true and correct to the best of my knowledge and agree to have any of the statements checked by the Academy unless I indicate otherwise. I authorize the references indicated, as well as any other individuals whom the Academy contacts, to provide the Academy any and all information concerning my previous employment and any other pertinent information that they may need. Furthermore, I release all parties and persons from any and all liabilities for any damages that may result from furnishing such information by the Academy or any of its agents, employees or representatives.

I understand that any misrepresentation, falsification or information omission on this application may result in my failure to receive an offer of employment or, if I a hired, may result in my employment being terminated by the Academy.

Signature of Applicant

Date

Applications will be retained for one year and will be reviewed annually.

Completed applications should be returned to:

Omar Haikal Islamic Academy
485 E Eldorado Lane
Las Vegas, NV 89123