

Caravel Academy

2801 Del Laus Road Bear, Delaware 19701



ROBERT C. PEOPLES
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Head of School

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TRANSPORTATION DEPARTMENT EMPLOYMENT APPLICATION

Name _____

Address _____ City _____ State _____ ZIP code _____

Home phone _____ Cell phone _____

Email _____ Soc. Sec. No. _____

Date of Birth _____ Place of Birth _____

Delaware Driver's License Number _____

Spouse's Occupation _____ Employer _____

Children's Names _____ Age _____

_____ Age _____

_____ Age _____

_____ Age _____

Position Applying For: _____

EDUCATIONAL BACKGROUND

Dates

High School

Diploma

University

Degree

Major

Minor

WORK EXPERIENCE

<u>Dates</u>	<u>Employer (Name/Address)</u>	<u>Phone Number</u>	<u>Position</u>	Reason For <u>Leaving</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PERSONAL REFERENCES

NAME	RELATIONSHIP	TELEPHONE NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

I, the undersigned, acknowledge that the above statements and information provided are accurate and true and give permission to Caravel Academy to verify any of the information given. If any of the information provided is not accurate or true, I understand this to be grounds for dismissal from all contractual obligations with Caravel Academy.

Applicant

Date

Caravel Academy does not discriminate on the basis of race, color, national and/or ethnic origin in administration of its' educational policies, admissions policies, scholarship and loan programs, hiring practices, and athletic and other school administered programs.