

## **Briarwood Academy**

4859 Thomson Highway Warrenton, Georgia 30828 Phone: 706-595-5641 Fax: 706-595-0097

Email: info@briarwoodacademy.com



## **Employment Application (Custodial/Food Services Position)**

	Applic	cant Information	
Full Name:			Date:
	Last First	Middle/Maiden	
Address:			
	Street Address		
	<u> </u>		710.0
	City	State	ZIP Code
Phone:		Email	
	Home (if applicable) Cell		
Date of Birth	n: Ag	ge: Male: □	] Female: □
Heath: Goo	d □ Average □ Poor □ Explain:		
Marital Statu	us: Married □ Single □ Separated □	Divorced ☐ Spouse's Name:	
Emergency Contact:  Name  Phone Number			
Are you a c	YES NO		
Have you ev		NO	
If yes, expla	in:		
_	Previous Employme	ent (Last Full-Time Employer)	
Date you we	ere last employed on a full-time basis: Fro	m: To:	
Company:		Phone	<u>.</u>
Address:			e:
Address.		Supervisor	r:
Job Title:	Reason for L	eaving:	
Responsibili	ties:		

Prospecti	ve Employee Information		
Describe services you could perform if employed by Briarwood Academy:			
Please add any information you feel would be help	oful in evaluating you as a prospective employee at Briarwood		
Academy:			
References			
Please list three professional references.			
Full Name:	Job Position:		
Company:	Phone:		
Address:			
Full Name:	Job Position:		
Company:			
Address:			
Full Name:	Job Position:		
Company:	Phono:		
Address:			
Signature:	Date:		
Signature:	Date:		

By signing this application, I hereby grant Briarwood Academy or its representative permission to verify information provided on this application, including contacting any or all references given. Briarwood Academy does not discriminate on the basis of color, race, national or ethnic origin in administration of its educational policies or other school administered programs.