

ERVING SCHOOL UNION #28

SUPPORT PERSONNEL

NAME: _____

POSITION: _____

ADDRESS: _____

TELEPHONE: _____

SS#: _____

EDUCATIONAL DATA

<u>SCHOOL NAME AND LOCATION</u>	<u>DATES ATTENDED</u>	<u>DEGREE</u>
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Elementary		
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High School		
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Technical School, College or University		
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Please list licenses and/or certifications: _____

WORK EXPERIENCE

<u>DATES</u>	<u>POSITION</u>	<u>EMPLOYER & ADDRESS</u>	<u>REASON LEFT</u>
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REFERENCES

LIST THREE (3) REFERENCES

<u>NAME AND ADDRESS</u>	<u>TELEPHONE</u>	<u>OCCUPATION</u>
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Signature

Date