

## CCHS Mock Interview Application

*Important - This form must be completed in full in order for your application to be accepted.*

Position Desired: \_\_\_\_\_ Date of Application: \_\_\_\_\_

### Applicant Information

Applicant Name \_\_\_\_\_

Home Phone \_\_\_\_\_ Other \_\_\_\_\_

Email Address \_\_\_\_\_

Current Address - Number and street \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Do you have a valid Oregon Driver's License? \_\_\_\_\_ ODL# \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

If yes, explain in full \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### EDUCATION

Name and Location of Grammar School: \_\_\_\_\_

Name and Location of High School: \_\_\_\_\_

Current Grade:  9<sup>th</sup>  10<sup>th</sup>  11<sup>th</sup>  12<sup>th</sup> GPA (see counselor): \_\_\_\_\_

Job-related subjects studied:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

**ACTIVITIES AND HONORS** (Civic, Athletic, Academic, etc.)

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**EMPLOYMENT HISTORY**

Are you employed now? \_\_\_\_\_ If so, may we contact your present employer? \_\_\_\_\_

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

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM _____ TO _____				
FROM _____ TO _____				
FROM _____ TO _____				

Which of these jobs did you like best? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

**REFERENCES:** List the names of three persons not related to you, whom you have known at least one year.

Name and Address	Phone	Business	Years Acquainted

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_