



Dhamma Dipa School

(Bahujana Hitaya Education Trust)

Job Application Form

*All fields are required to be filled out accurately prior to being considered for a job opportunity with Dhamma Dipa School. Incomplete applications will not be processed. Upon completion, please email your application, CV, and copy of passport or identification card to **dr_dhammapiya@yahoo.com***

Please print legibly and as appears on the passport or identification card

Position Applying For:

Title (Mr/Mrs/Dr/etc.): _____ Sir/Family Name: _____

First Name: _____ Middle Name: _____

Passport Number: _____ Issue Date: _____

Expiration Date: _____ Issuing Country: _____

Mailing Address: _____

City: _____ Province/State: _____

Country: _____ Postal Code: _____

Home Phone: _____ Mobile: _____

Work Phone: _____ Fax: _____

E-mail Address: _____

Spouse's Name: _____

Spouse's Mobile: _____ Spouse's Work Phone: _____

Citizenship Information

Date of Birth (dd/mm/yyyy): _____ Male: _____ Female: _____

Country of Birth: _____

Country of Citizenship:

Country of Residence:

Former Country of Citizenship:

Name of person to contact in case of an emergency

Family Name:

First Name:

Relationship:

Mobile Phone:

Work Phone:

Will you be living on or off campus?

If living off campus, please list the address where you will be staying:

Information about your education: (Please fill in based on your current level of education.)

I have completed High School: Some College: Graduated College/University:

*If applicable, please list the college/university that you are attending now:

If applicable, please denote what academic year you are in currently:

I have completed or am finishing Graduate School:

I need volunteer hours for school/college credit: If yes, how many?

Please list the names of the colleges/universities you graduated from and the respective degrees earned:

Information about your employment

Current/Most Recent Employer:

Position:

Dates of Employment:

Job Duties:

Reason for leaving:

Employer:

Position:

Dates of Employment:

Job Duties:

Reason for leaving:

Employer:

Position:

Dates of Employment:

Job Duties:

Reason for leaving:

Other experience that can be utilized at the school:

Information about your health

Physician's Name:

(Please print)

Telephone Number:

Please list the medications that you are currently taking:

Is there any health reason that might limit your ability to work? Yes No

If yes, please describe:

Please check off the illnesses you have or have had:

Malaria: Tuberculosis: HIV/AIDS: Diabetes: (type 1 / type 2)

Please list any and all allergies that you have:

Please check the infectious illnesses you have been immunized for:

Measles: Hepatitis A: Hepatitis B: Tuberculosis: Diphtheria:

Polio: Tetanus: Rabies: Other:

How did you hear about Dhamma Dipa School (DDS)? Please check one

A DDS Volunteer: DDS Website: A DDS Employee:

Newspaper: TV: Work: School/College:

Other...please explain:

Information about your interest

Please describe in detail why you are interested in working at Dhamma Dipa School?

Desired salary:

Information about your interests/skills/experience and availability

Would you prefer to work: Directly with children Administration

Fundraising Marketing IT/Website development

Other (please explain):

Dates of availability (dd/mm/yyyy):

Please list your experiences or skills that relate to the preference indicated previously:

Please list any current or past volunteer roles with location (if any)

References

Please print the **COMPLETE** mailing addresses and phone numbers of three people we may contact (**excluding relatives and roommates**) who have known you for more than two years.

Name: _____ Relationship: _____

City: _____ Country: _____ Postal Code: _____

Telephone: _____ Number of years known: _____

Name: _____ Relationship: _____

City: _____ Country: _____ Postal Code: _____

Telephone: _____ Number of years known: _____

Name: _____ Relationship: _____

City: _____ Country: _____ Postal Code: _____

Telephone: _____ Number of years known: _____

Dhamma Dipa School reserves the right to conduct background checks

Have you ever been arrested for conducting or attempting to conduct a sexual offense?

_____ Yes _____ No

Have you ever been arrested for conducting or attempting to conduct an offense on a minor?

_____ Yes _____ No

Have you ever been arrested for conducting or attempting to conduct any other offenses?

_____ Yes _____ No

If yes, please list the date(s) of the arrest(s) and any facts and circumstances surrounding the arrest(s). Being arrested does not automatically exclude you from consideration.

Have you ever been convicted, plead no contest, or plead guilty to a major felony or a minor misdemeanor? (If yes, please explain above) _____ Yes _____ No

Release of Information (Please read the following carefully before signing)

I certify that all information in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that Dhamma Dipa School requires information from me to evaluate my qualifications for employment. I authorize and release personal references, employers (past and present), and, if necessary, other applicable entities to answer questions in regards to volunteer work, employment, ability, character, medical and emotional background and, if applicable, driving history. I have read and understand the above and by my signature consent to these statements.

Applicant Signature

Date (dd/mm/yyyy)

Disclaimer (Please read the following carefully before signing)

I understand, in consideration of my application, a background investigation will be conducted. I understand this investigation may include, but is not limited to a criminal background check in the files of any justice agency and country, driving history, performance of medical examinations, drug screening or reference verification. I authorize Dhamma Dipa School and associated entities to conduct the background investigation and release Dhamma Dipa School, Bahujana Hitaya Education Trust, and associated entities from responsibility for this investigation. I understand the requested information is for the sole purpose of gathering accurate information for employment at Dhamma Dipa School. Furthermore, **I agree to conduct myself to the highest moral standard expected of me and refrain from drinking alcohol, smoking, using drugs, or chewing bitternut leaves throughout the duration of my stay at Dhamma Dipa School.** If I am discovered to upset any of these requirements, I understand that my position will be terminated immediately, and I agree to undertake all costs for my removal from the campus. I have read and understand the above and by my signature consent to these statements.

Applicant Signature

Date (dd/mm/yyyy)