

PERSONAL INFORMATION								
	EMPLOYMENT APPLICATION COLEGIO INTERAMERICANO Please, fill out the required information and submit it to human.talent@interamericano.edu.gt.							
	NAME:		TITLE (Mr., Ms., Mrs.)	FIRST NAME	MIDDLE NAME	LAST NAME		
	ADDRESS					CITY - COUNTRY		ZIPCODE
	COUNTRY OF BIRTH			DATE OF BIRTH	MM	DD	YYYY	NATIONALITY
	PHONE INFORMATION				E-MAIL		AGE	GENDER
	COUNTRY/ STATE CODE	PHONE NUMBER						M <input type="checkbox"/> F <input type="checkbox"/>
	MARITAL STATUS	NAME OF PARTNER	PARTER WILL ACCOMPANY	PROFESSION OF PARTNER	WILL YOUR PARTNER APPLY FOR A JOB WITH US?		Y <input type="checkbox"/> N <input type="checkbox"/>	
	# OF CHILDREN		AGES OF CHILDREN			WILL YOUR CHILDREN ACCOMPANY YOU?		Y <input type="checkbox"/> N <input type="checkbox"/>
	FAVORITE HOBBIES AND EXTRACURRICULAR ACTIVITIES:							
	WHAT EXTRACURRICULAR ACTIVITIES HAVE YOU OFFERED TO STUDENTS? <input style="width: 100%;" type="text"/>							
	WHAT EXTRACURRICULAR ACTIVITIES COULD YOU OFFER TO OUR STUDENTS: <input style="width: 100%;" type="text"/>							
	PLEASE INDICATE ANY SPECIAL HEALTH CONDITIONS:							

CONDITION:

TREATMENT:

CONTROLLED: Y ☐ N ☐

CONDITION:

TREATMENT:

CONTROLLED: Y ☐ N ☐

OTHER:

Previously existing medical conditions are not covered until you have been enrolled in the insurance plan for at least 6 months. Coverage is subject to evaluation and approval by the Insurance Company and is not guaranteed, even after the 6-month period.

AREAS OF INTEREST	POSITION(S) YOU ARE APPLYING FOR:		<input style="width: 100%;" type="text"/>
	LAST COUNTRY OF RESIDENCE:		<input style="width: 150px;" type="text"/> DATES: <input style="width: 100px;" type="text"/>
	HAVE YOU APPLIED BEFORE FOR A JOB AT COLEGIO INTERAMERICANO?		Y <input type="checkbox"/> N <input type="checkbox"/>
	DATE: <input style="width: 100px;" type="text"/>	POSITION: <input style="width: 150px;" type="text"/>	DIVISION: <input style="width: 150px;" type="text"/>

EDUCATION	UNIVERSITY AND COLLEGE EDUCATION, INCLUDING TEACHING QUALIFICATIONS (MOST RECENT FIRST):			
	DEGREE TITLE	YEAR OF DEGREE	AWARDING INSTITUTION AND COUNTRY	MAJOR SUBJECT
	*If your are currently studying for an award, please give the expected completion date.			
	IF YOU ARE CURRENTLY STUDYING, PLEASE FILL OUT THE FOLLOWING:			

ONLINE PROGRAM: Y ☐ N ☐

CAREER:

IF YOUR PROGRAM IS NOT ONLINE, PLEASE SHARE SCHEDULE:

OTHER DEGREES / AWARDS:			
COURSES:	TITLE	INSTITUTION AND COUNTRY	DATES

LANGUAGES	SPOKEN LANGUAGES:			
	FIRST LANGUAGE: _____			
	OTHERS: _____	FLUENT: <input type="text"/>	PROFICIENT: <input type="text"/>	BEGINNER: <input type="text"/>
	_____	FLUENT: <input type="text"/>	PROFICIENT: <input type="text"/>	BEGINNER: <input type="text"/>
	_____	FLUENT: <input type="text"/>	PROFICIENT: <input type="text"/>	BEGINNER: <input type="text"/>

WORK HISTORY #1	WORK HISTORY AND EXPERIENCE:			
	PLEASE FILL OUT THIS PART WITH YOUR LAST FOUR JOBS, STARTING WITH THE MOST RECENT. YOU MUST COMPLETE ALL THE REQUIRED INFORMATION FOR OUR REFERENCE CHECK PROCESS.			
	MOST RECENT JOB:			
	NAME OF SCHOOL: <input type="text"/>		COUNTRY: <input type="text"/>	
	EMPLOYMENT START DATE: <input type="text"/>	EMPLOYMENT END DATE: <input type="text"/>	DIVISION AND GRADE: <input type="text"/>	
	YOUR JOB TITLE: <input type="text"/>		NO. OF STAFF REPORTING DIRECTLY TO YOU: <input type="text"/>	
	MAIN AREAS OF RESPONSIBILITY: <input type="text"/>			
	MAIN SUBJECT TAUGHT: <input type="text"/>		OTHER SUBJECTS TAUGHT: <input type="text"/>	
	REASON(S) FOR LEAVING: <input type="text"/>			
	SUPERVISOR'S CONTACT INFORMATION			
COUNTRY		COUNTRY / STATE CODE	PHONE NUMBER	EMAIL
REFERENCES CAN BE VERIFIED WITH THIS EMPLOYER FOR THE RECRUITMENT PROCESS: Y <input type="text"/> N <input type="text"/>				

WORK HISTORY #2	PREVIOUS JOB:				
	NAME OF SCHOOL: <input type="text"/>		COUNTRY: <input type="text"/>		
	EMPLOYMENT START DATE: <input type="text"/>	EMPLOYMENT END DATE: <input type="text"/>	DIVISION AND GRADE: <input type="text"/>		
	YOUR JOB TITLE: <input type="text"/>		NO. OF STAFF REPORTING DIRECTLY TO YOU: <input type="text"/>		
	MAIN AREAS OF RESPONSIBILITY: <input type="text"/>				
	MAIN SUBJECT TAUGHT: <input type="text"/>		OTHER SUBJECTS TAUGHT: <input type="text"/>		
	REASON(S) FOR LEAVING: <input type="text"/>				
	SUPERVISOR'S CONTACT INFORMATION				
	COUNTRY		COUNTRY / STATE CODE	PHONE NUMBER	EMAIL
	REFERENCES CAN BE VERIFIED WITH THIS EMPLOYER FOR THE RECRUITMENT PROCESS: Y <input type="text"/> N <input type="text"/>				

WORK HISTORY #3

PREVIOUS JOB:			
NAME OF SCHOOL:		COUNTRY:	
EMPLOYMENT START DATE:		EMPLOYMENT END DATE:	
		DIVISION AND GRADE:	
YOUR JOB TITLE:		NO. OF STAFF REPORTING DIRECTLY TO YOU:	
MAIN AREAS OF RESPONSIBILITY:			
MAIN SUBJECT TAUGHT:		OTHER SUBJECTS TAUGHT:	
REASON(S) FOR LEAVING:			
SUPERVISOR'S CONTACT INFORMATION			
PHONE NUMBER			EMAIL
COUNTRY		COUNTRY / STATE CODE	
		PHONE NUMBER	
REFERENCES CAN BE VERIFIED WITH THIS EMPLOYER FOR THE RECRUITMENT PROCESS:			Y <input type="checkbox"/> N <input type="checkbox"/>

WORK HISTORY #4

PREVIOUS JOB:			
NAME OF SCHOOL:		COUNTRY:	
EMPLOYMENT START DATE:		EMPLOYMENT END DATE:	
		DIVISION AND GRADE:	
YOUR JOB TITLE:		NO. OF STAFF REPORTING DIRECTLY TO YOU:	
MAIN AREAS OF RESPONSIBILITY:			
MAIN SUBJECT TAUGHT:		OTHER SUBJECTS TAUGHT:	
REASON(S) FOR LEAVING:			
SUPERVISOR'S CONTACT INFORMATION			
PHONE NUMBER			EMAIL
COUNTRY		COUNTRY / STATE CODE	
		PHONE NUMBER	
REFERENCES CAN BE VERIFIED WITH THIS EMPLOYER FOR THE RECRUITMENT PROCESS:			Y <input type="checkbox"/> N <input type="checkbox"/>

*IF YOU WERE REFERRED BY A COLEGIO INTERAMERICANO EMPLOYEE, PLEASE SHARE HIS/HER NAME:	
Do you have any legal or criminal condition that would restrict you from accepting a job at Colegio Interamericano or any other educational institution?	Y <input type="checkbox"/> N <input type="checkbox"/>
COMMENTS:	