



Kestrel Heights School

4700 S. Alston Avenue

Durham, NC 27713

919-484-1300 Fax 919-484-1355

kestrelheights.org

Name _____

Address _____

Home phone _____ Cell phone _____

Email _____

History

Education (High School, College and/or University)

Name, Address,
City, State, Zip

Dates of
attendance

Degree/Date

1. _____

2. _____

3. _____

4. _____

Awards and Special Recognition (add additional sheets if necessary)

May we contact your current employer? (Circle one) Yes No

Experience (begin with most recent position; add additional sheets if necessary)

Employer, Name of Immediate Supervisor Dates of Employment Salary
Address, City, State. Zip
Telephone/Fax

Description of Duties

Employer, Name of Immediate Supervisor Dates of Employment Salary
Address, City, State. Zip
Telephone/Fax

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Address, City, State. Zip
Telephone/Fax

Description of Duties

Other Training/Skills/Interests

References (Name, Address, Telephone Number)

Have you ever been convicted of an offense other than a minor traffic violation?

(Circle one) Yes No

If yes, please explain:

Signature

Date

*Mail application, unofficial transcript(s), and cover letter with resume to:

Kestrel Heights School
4700 S. Alston Avenue
Durham, NC 27713
Att: Maggie Buckholz