



# St. Jude the Apostle School

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## APPLICATION FOR EXTENSION EMPLOYMENT

### Personal Information

Name \_\_\_\_\_

Current Address \_\_\_\_\_

\_\_\_\_\_

Home/Cell Phone Number \_\_\_\_\_

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

Are you 18 years of age or older? Yes or No \_\_\_\_\_

### References

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

Are you attending school? \_\_\_\_\_ If so, where? \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

*FAITH, ACADEMICS, EXCELLENCE*

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