

UNION COUNTY-COLLEGE CORNER JOINT SCHOOL DISTRICT

107 Layman Street, Liberty, Indiana 47353

Phone: 765-458-7471

Fax: 765-458-5647

PERSONNEL APPLICATION FOR CERTIFIED STAFF EMPLOYMENT

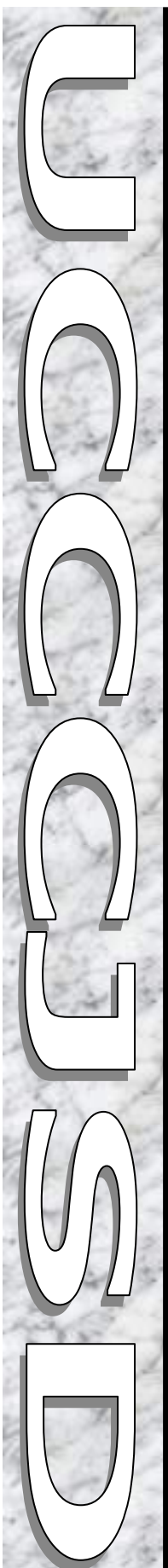
Thank you for your interest in our school district. While we understand that the task is never complete, our district goal of putting "Kids First" continually motivates us to strive for educational excellence. If our goal is one that you share, please thoroughly and legibly complete this application. We'd love to speak with you more about your commitment to children.

Name:	Date:
Street Address (to assure contact, if necessary):	Social Security Number:
City:	State & Zip:
Home Telephone Number:	Work Telephone Number:
Cell Phone Number:	E-mail:
Parent or Spouse Name	
Earliest Date Available for Work	
Indiana Teacher Retirement Fund Number	
Are you currently under contract? <input type="checkbox"/> Yes <input type="checkbox"/> No	

POSITION SOUGHT

INDICATE ORDER OF PREFERENCE	SCHOOL PLACEMENT DESIRED	LIST GRADE LEVELS OR SUBJECTS IN ORDER OF PREFERENCE
	Elementary Teacher (K-5)	
	Middle School Teacher (6-8)	
	High School Teacher (9-12)	
	Other (<i>Please identify.</i>)	

Union County-College Corner Joint School District is an equal opportunity employer.



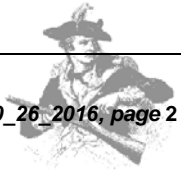


E D U C A T I O N					
TYPE	NAME & LOCATION	DATES ATTENDED	DEGREE EARNED	MAJOR & HOURS	MINOR & HOURS
High School					
College or University					
College or University					
College or University					
Post-graduate					
Special Training					
Additional Training					
Other					
Other					

T E A C H I N G E X P E R I E N C E			
SCHOOL SYSTEM NAME	DATES of EMPLOYMENT	SUBJECTS OR GRADES TAUGHT	PRINCIPAL NAME & CONTACT INFORMATION
STUDENT TEACHING SCHOOL PLACEMENT	DATES of EMPLOYMENT	SUBJECTS OR GRADES TAUGHT	SUPERVISING TEACHER'S NAME & CONTACT INFORMATION

Total years of public school teaching experience (not including student teaching):

T E A C H E R C E R T I F I C A T I O N				
TYPE, KIND, AND/OR GRADE OF LICENSE	STATE	EXPIRATION DATE	NUMBER	SUBJECTS, GRADES, AND/OR ENDORSEMENTS





OTHER WORK EXPERIENCES			
TYPE OF WORK	PLACE OF EMPLOYMENT	DATES OF EMPLOYMENT	SUPERVISOR'S CONTACT INFORMATION

MILITARY SERVICE RECORD
Branch of Service
Rank & Type of Service
Training & Experience Received
Years of military service:

REFERENCES			
<i>These should be five (5) individuals qualified to evaluate your personal and teaching qualification. Include administrators, supervisors, employers, teacher leaders, college professors, or other familiar with your teaching abilities.</i>			
NAME OF REFERENCE	PHONE NUMBER	OCCUPATION	YEARS KNOWN

OTHER DATA
List special abilities (musical, artistic, athletic, oratorical, etc.).
List extracurricular high school, college, and community activities.
List professional, honorary, and service organization memberships.





ADDITIONAL QUESTIONS

- Yes No 1. Do you have any relatives who are employed by this school district?
- Yes No 2. Is there any information we would need about your name or your use of another name for us to be able to check your record?
- Yes No 3. Have you ever been convicted of an alcohol-related driving offense?
- Yes No 4. Have you ever been convicted of an offense for the misuse of drugs or alcohol?
- Yes No 5. Have you ever been convicted of a felony?
- Yes No 6. Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer?
- Yes No 7. Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position?
- Yes No 8. Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of inappropriate sexual activity, mishandling of funds, or criminal conduct?
- Yes No 9. Have you ever been charged with or investigated for physical or sexual abuse of another person?
- Yes No 10. Have you ever been charged with, pleaded "guilty" or "no contest" to, or been convicted of any crime involving sexual abuse of any person, or any other crime of moral turpitude?
- Yes No 11. Have you ever been convicted of a misdemeanor and/or felony, or ever entered a plea of "guilty" or a plea of "no contest," or has any court ever deferred further proceedings without entering a finding of guilty or place you on probation for any crime?

If you answered "Yes" to any one of the previous ten (10) questions, please attach a written explanation, including the date of the incident, charges, any court action taken, the offense in question, and the address of any court involved.

- I understand that any false or misleading information on this application shall be fully sufficient grounds to refuse employment and/or to terminate employment.
- I understand that this application is not a contract of employment.
- I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this.
- I understand that the school district will thoroughly investigate my work and personal history and will verify all data given on this application, on related papers, and in interviews.
- I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.
- I grant authorization to the Union County-College Corner Joint School District to check my employment from any of my present or former employers, supervisors, or co-workers; reference checks; personal credit check and to seek the release of investigatory information, including a "limited criminal history" possessed by any private or public employers, or local, state, or federal agencies to provide the Union County-College Corner Joint School District any information they may release concerning the matter described herein, and will cooperate to the extent necessary to obtain the release of this information.
- I expressly waive, in connection with any request for, or provision of such information any claims or causes of action, including without limitation, defamation, infliction of emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against the Union County-College Corner Joint School District, its officials, employees, trustees, or agents, any individual, corporate, and/or agency provider of such information. I have read this authorization and release of all claims, and expressly agree to the terms set out herein.

Signature _____

Date _____

