

Certified Employment Application



Name:

Address:

State/Province:

Zip/Postal Code:

e-mail address:

Home Phone:

Cell Phone:

Alternative Phone:

Date:

South Spencer County School Corporation
 P O Box 26
 321 S. 5th Street
 Rockport, IN 47635
 Phone: 812-649-2591
 Fax: 812-649-4249
 www.sspencer.k12.in.us

Positions Applied for:

Number in order of preference

Kindergarten	<input type="text"/>	Grade 6	<input type="text"/>
Grade 1	<input type="text"/>	Grade 7	<input type="text"/>
Grade 2	<input type="text"/>	Grade 8	<input type="text"/>
Grade 3	<input type="text"/>	Grade 9	<input type="text"/>
Grade 4	<input type="text"/>	Grade 10	<input type="text"/>
Grade 5	<input type="text"/>	Grade 11	<input type="text"/>
Special Ed.	<input type="text"/>	Grade 12	<input type="text"/>

List Special Endorsement Area(s):

List Major Teaching Area(s):

List Minor Teaching Area(s):

Activities you can sponsor/supervise/coach:

LICENSE INFORMATION

Type of License (Elem., Sec., Etc.)	Subject Endorsement	Grade	Date of Issue	Expiration Date	License Number

Number of Years Teaching: Indiana Teacher Retirement Number:

Check all Degrees Received

BS BA MS MA Ed. Spec. Doctorate

Continue on the next page

EDUCATION

Type of School	Name of School and Complete Mailing Address	No. Years Completed	Major or Degree
High School			
College			
College			
College			
Other			

Note: Candidates who have graduated from out-of-state colleges and universities should have teaching credentials evaluated by the Indiana Professional Standards Board, 100 West Ohio Street, Suite 300, Indianapolis, IN 46204.

Teaching Experience & Student Teaching Experience

Begin with most recent

1.

Name & Location of School:

Name of Immediate supervisor:

Dates of employment:

From:

To:

Grades or Subjects Taught

2.

Name & Location of School

Name of Immediate supervisor:

Dates of employment:

From:

To:

Grades or Subjects Taught

3.

Name & Location of School

Name of Immediate supervisor:

Dates of employment:

From:

To:

Grades or Subjects Taught

Continue on the next page

Work Experience other than Teaching

Begin with most recent

Employer Address:

Last job title:

Dates of employment:

From:

To:

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

Reason for Leaving (be specific):

May we contact for reference?

Yes

No

Phone #:

Name of Employer:

Employer Address:

Last job title:

Dates of employment:

From:

To:

List the jobs you held, duties performed, skills used or learned, advancements, or promotions while you worked at this company:

Reason for Leaving (be specific):

May we contact for reference?

Yes

No

Phone #:

Continue on the next page

Please list 2 references other than relatives and previous employers

1.

2.

Name			
Position			
Company			
Telephone			
Relationship			

Use this space to add any additional information necessary to describe your full qualifications for the position which you are applying:

Request for Background Information

Jobs with the South Spencer County School Corporation involve contact with our student population. We ask that you complete the questions below to help us evaluate your suitability to work with these students. All applicants for employment are expected to provide us with this information; you are not being singled out for closer inspection. This insert is part of the Application itself and any misrepresentation or omission of fact may be grounds for disqualification from further consideration or for termination from employment regardless of when the misrepresentation or omission is discovered.

The conviction of a crime or any affirmative answer provided by you on this insert is not an automatic bar to employment. The School District will consider the nature of any conviction or alleged conduct underlying the affirmative response, the date of all of the alleged conduct in question, your intervening conduct and the relationship between the offense or alleged conduct underlying the affirmative response and the position for which you are applying.

If you are now working, is your conduct as an employee or the quality of your work the focus of any investigation by your current employer? If yes, explain the circumstances on a separate sheet and attach it to this application.

- Yes No

Have you ever resigned from a job after being disciplined by your employer or after being offered the opportunity to resign rather than be terminated? If yes, explain the circumstances on a separate sheet and attach it to this application.

- Yes No

Have you ever been investigated for, charged with or plead guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor? If yes, explain the circumstances on a separate sheet and attach it to this application.

- Yes No

Have you ever been charged with a crime, other than a minor traffic offense, where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program. If yes, explain the circumstances on a separate sheet and attach it to this application.

- Yes No

I authorize the School Corporation to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including a "Expanded Criminal History" possessed by any private or public employer or any local, state or federal agency. I authorize these private or public employees or local, state or federal agencies to provide School Corporation any information they may release concerning the matters described herein and I 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, distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school corporation, its officials, employees, trustees or agents, or against any provider of such information.

I have read the authorization and release of all claims, and I expressly agree to the terms set out herein.

Signature: Printed Name: Date: