







CERTIFIED EMPLOYEE APPLICATION

West Clark Community Schools does not discriminate in hiring or employment on the basis of age, race, color, gender, handicap, religion or national origin. No question on this form is intended to secure information to be used for such discrimination. An official transcript and license must also be on file to be an active applicant.

Date:_____ EMail:____

License Information:				
Serial #:	State:		Expiration Date:	
Employment Application				
	Applicant	Information		
First Name:	Last Name:			
Address:				
City:	State:	Zip:		
Phone:	Date of Birth:	Age:		
Social Security Number:		Ethnicity:		
Are you a Citizen of the United S	States? Yes No			
If No, Are you authorized to wor	k in the U.S.? Yes _	No		
Have you ever worked for WCC	S? Yes No	If Yes, when?		
Have you ever been convicted of	of a Felony? Yes	No		
If Yes, explain:				

Education						
High School	: Address:					
From:	To: Did you graduate?	YES	NO	Diploma:		
College:	Address:					
From:	To: Did you graduate?	YES	NO	Degree:		
Other:	Address:					
From:	To: Did you graduate?	YES	NO	Degree:		
	Refer	ences				
Please list	three professional references.					
Full Name:				Relation	onship:	
Company:					Phone:	
Address:	City:			State:	Zip):
Full Name:				Relation	onship:	
Company:						
Address:	City:):
Full Name:				Relatio	onship:	
Company:						
Address:	City:			State:):
	Previous E	mploy	ment			
Company:					Phone:	
Address:						
Job Title:	Starting S				iding Salar	
Responsibil	ities:					
From:	To:					
May we con	tact your previous supervisor for a reference?	YES		NO		
	application be treated as confidential with our present employer?	YES		NO		
Company:					Phone:	
Address:				Supe	ervisor:	

Job Title: _	Starting	Starting Salary:		Ending Salary:	
Responsibilitie	es:				
From:	To:	Reason fo	or Leaving:_		
May we conta	ct your previous supervisor for a reference?	YES	NO		
	pplication be treated as confidential with r present employer?	YES	NO		
	Se	rvice	_		
	ty Involvement: ty organizations in which you have been involute:				
				sitions you held in these	
	n Questions: (please feel free to attach a how many days of work (or school) have yo	additional pa u missed in	iges) the past 5 y		
Beliefs - Contributions:	beliefs about public schools, and what you w			,	
i icase wille a	a onon statement houng any unique qualificat	iuiia, Willull I	may uisiirigu	non you nom omer candidates.	

Disclaimer – Criminal History Search and Signature

As of July 1, 2009, Indiana Code 20-26-5-10 requires all <u>new</u> employees in school corporations, charter schools, and accredited non-public schools to submit to an "expanded criminal history check". This expanded search will include local, state and out of state records, including sex offender registries.

The applicant/employee is responsible for <u>all costs</u> associated with obtaining the expanded criminal history. The cost will be a minimum of **\$29.00**. Upon hiring, you will give your information and payment (**in form of money-order or cashier's check only**) made payable to <u>"Backgroundchecks.com"</u>. The administrative assistant will then complete the process for you.

The background check takes approximately 3-5 days. You will then be notified by your immediate supervisor regarding your first date of employment.

Authorization and Release

I authorize the school district to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including a "limited 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 the school district any information they may release concerning the manor 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, including without limitation, defamation, infliction of emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school district, its officials, employees, trustees, or against any provider of such information.

I have read this authorization and release of all claims, and I expressly agree to the terms set out herein. I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:	Date: