

APPLICATION FOR CERTIFIED POSITIONS

M.S.D. OF WARREN COUNTY

101 North Monroe Street, Box 207
Williamsport, Indiana 47993

The Metropolitan School District of Warren County, Indiana does not discriminate in hiring or employment on the basis of race, color, sex, age, disability, religion, or national origin.

(Please type or print all information in the application. Additional material can be submitted as needed.)

APPLICATION FOR POSITION(S) _____

BACKGROUND INFORMATION EMAIL _____

NAME _____

HOME ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE _____ BIRTHDATE _____

SOCIAL SECURITY NUMBER _____ - _____ - _____

(Completion of social security number is optional. Failure to submit social security number will not prohibit employment consideration. Your social security number will be required on various other employment documents.)

CURRENT EMPLOYMENT INFORMATION

NAME OF EMPLOYER _____

BUSINESS ADDRESS _____ TELEPHONE _____

CITY _____ STATE _____ ZIP _____

LENGTH OF PRESENT CONTRACT _____ EXPIRATION DATE _____

PRESENT SALARY _____ DATE AVAILABE TO BEGIN NEW POSITION _____

PRESENT POSITION _____

Do you hold, or are you eligible to obtain, a valid Indiana License? YES _____ NO _____

If yes, list all license areas and endorsements. LICENSE AREA(S) _____

EDUCATION(Undergraduate and Graduate)

MILITARY EXPERIENCE

PROFESSIONAL EXPERIENCE AND/OR EMPLOYMENT HISTORY

PROFESSIONAL ORGANIZATIONS

(List the organizations in which you have been most active recently and indicate offices held, personal contributions, or other responsibilities.)

COMMUNITY LEADERSHIP ACTIVITIES

(List activities in which you have been most active recently and indicate your contribution to the community.)

HONORS AND DISTINCTIONS

(List honors, awards, commendations, elective or appointive offices held, or other distinctions received.)

REFERENCES

(List five persons who know your professional background and qualifications. Please request two of these five persons to forward a confidential reference concerning your qualifications for this position to the address noted on the last page.)

ADDITIONAL BACKGROUND INFORMATION

- Yes No 1. Is your conduct as an employee or the quality of your work the focus of any investigation by your current employer?
- Yes No 2. Have you ever been reprimanded, disciplined, discharged, or asked to resign from a previous position?
- Yes No 3. Have you ever resigned from a position after being offered the opportunity to resign rather than be terminated?
- Yes No 4. Have you ever resigned from a prior position without being asked; but under circumstances involving your employer's investigation of sexual conduct with another person, mishandling of funds, or criminal conduct?
- Yes No 5. Have you ever been investigated for, charged with, or pled guilty or "no contest" to any crime involving sexual abuse of any person or indecency with a minor?
- Yes No 6. Have you ever pled guilty, been convicted of, or otherwise been found in violation of the law by a court for any matter other than a minor traffic violation?
- Yes No 7. Have you ever been charged with a crime, other than 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?

What trait(s) will separate you from the other applicants for this position?

WAIVER

PUBLIC LAW 93-389 “FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT OF 1974”

I hereby certify that the information found within this application has been provided voluntarily and I waive any right to assert discrimination on the basis of that which has been divulged.

I hereby authorize all persons, firms, corporations, educational institutions, and organizations of any kind to release to the **M.S.D. of Warren County** any and all information, files, or records pertaining to this application, and to permit inspection, and to furnish copies of any documents pertinent to this application. I further authorize any and all persons in any capacity to answer any and all questions in any form that may be submitted to them concerning this application.

In the event of employment, I understand that false, misleading or omission of information given in my application or interview(s) may result in discharge.

I expressly waive in connection with any request for, or provision of such information any claims or accuses of action including, without limitation, defamation, infliction or emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school district, its officials, employees, trustees or agents, or against any provider of any information.

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

The information submitted on this application is accurate to the best of my knowledge. I understand that my application will be retained in current files for a period of one year.

Applicant’s Signature

Date

Please address all communications to:

**Ralph Shrader, Superintendent
M.S.D. of Warren County
101 North Monroe Street, Box 207
Williamsport, Indiana 47993**