

JOINT SCHOOL DISTRICT NO. 171
1145 Riverside Avenue ♦ PO Box 2259 ♦ Orofino, ID 83544
Phone: (208)-476-5593 ♦ Fax: (208)-476-3724

APPLICATION FOR SUBSTITUTE EMPLOYMENT

Thank you for your interest in our school district. We accept applications regardless of whether we have an opening. If you submit an application prior to a vacancy posting it will be activated for open positions upon the receipt of a letter of interest. Any questions please contact Human Resources at the number above or email: HR@jsd171.org

A complete application packet consists of:

1. A complete Joint School District # 171 Application for Educational Support Personnel
2. Signed Authorization for Release of Information form
3. A completed Veteran's Preference Form if you qualify as a Veteran and want to obtain Veteran's Preference. You must also include a copy of your DD214 form.

Process:

1. Application will be screened by Human Resources and Principals/Directors.
2. References will be contacted.
3. A recommendation for hire will be made to the Superintendent. Upon the Superintendent's approval, a verbal offer of employment can be made.
4. Final approval will be made by the Board of Trustees.

Candidate selected to fill a position:

1. Will be required to submit fingerprints and undergo a background investigation check at the candidate's expense of \$32.00.
2. Will be required to undergo a drug screening at the District's expense.

An offer of employment is considered conditional pending the District's review of previous work history, clearance of the background investigation check and drug screening, and official approval by the Board of Trustees.

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EDUCATIONAL SUPPORT PERSONNEL**APPLICATION FOR EMPLOYMENT**

All positions are filled without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

PLEASE PRINT OR TYPE

| | |
|---|---------------------|
| Position Applied for | Date of Application |
| Are you claiming Veteran's Preference? Yes ____ No _____. If yes, please provide a copy of your Form DD214, and please request, complete, and submit the Veteran's Preference Form with your application. | |
| Have you claimed such preference in prior applications with the school district? Yes ____ No _____. _____ | |

PERSONAL INFORMATION

| | |
|----------------------------|---------------------|
| Name (Last, First, Middle) | Telephone Number(s) |
| Mailing Address | E-mail Address |
| City, State, Zip Code | |

Have you ever been terminated by the District? Yes No

Have you ever filed an application with the District? Yes No
If yes, give date(s) _____

Have you ever been employed by the District? Yes No
If yes, give date(s) _____

Are you currently employed? Yes No

May our district representative contact your present employer? Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Are you legally authorized to work in the United States of America? Yes No

On what date would you be available to work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Can you travel if a job requires it? Yes No

Have you ever been convicted of a felony? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain and identify type of felony and jurisdiction. _____

Do you have a relative currently working for the school district?

Yes

No

Can you perform all of the functions of the job you are seeking?

Yes

No

EDUCATION/PROFESSIONAL

Have you obtained a high school diploma or GED certificate? Yes No

Have you passed the ETS Parapro Exam? (required for Aide positions) Yes No

Date Passed _____ (Please attach a copy of your scores)

Higher Education: Please attach copy of transcripts if applicable.

| College or University/Location | Degree | Date of Degree | # of Academic Credits |
|--------------------------------|--------|----------------|-----------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Skills & Qualifications: Licenses, Skills, Training

Describe any honors you have received.

List professional, trade, business or civic activities, and offices held.

State any additional information you feel may be helpful to us in considering your application.

REFERENCES

List three references who are not related to you.

| | <u>NAME</u> | <u>ADDRESS</u> | <u>TELEPHONE</u> | <u>RELATIONSHIP</u> |
|---|-------------|----------------|------------------|---------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

EMPLOYMENT HISTORY

Start with the most recent employment first and include any military service assignments.

| | |
|---------------------|--------------------------------------|
| Employer | Date Employed From _____ To _____ |
| Address | |
| Telephone Number(s) | Description of Work Performed |
| Job Title | |
| Reason for Leaving | |
| Employer | Date Employed From _____ To _____ |
| Address | |
| Telephone Number(s) | Description of Work Performed |
| Job Title | |
| Reason for Leaving | |

| | |
|---------------------|--------------------------------------|
| Employer | Date Employed From _____ To _____ |
| Address | |
| Telephone Number(s) | Description of Work Performed |
| Job Title | |
| Reason for Leaving | |
| Employer | Date Employed From _____ To _____ |
| Address | |
| Telephone Number(s) | Description of Work Performed |
| Job Title | |
| Reason for Leaving | |

If you need additional space, please use a separate sheet of paper

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge.

I understand that the District will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals and entities named herein, except my current employer if so noted on the first page of this application, to provide any information requested about me and I release them from all liability for damage in providing this information.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all the rules, regulations and policies of the District.

Signature of Applicant

Date

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AUTHORIZATION FOR RELEASE OF INFORMATION ON PAST EMPLOYMENT WITH SCHOOL EMPLOYERS IDAHO CODE 33-1210

Idaho Law requires applicants for any position at any Idaho Public School to allow the hiring school district employer to obtain a copy of past public school employer personnel file materials and other documentation relating to the performance of the applicant when such applicant was employed by any other public school, whether in Idaho or any other state.

Before hiring an applicant for any position, the District must request the applicant to sign this form. Should the applicant refuse or fail to sign this form, the District is not permitted to hire the applicant for any position. This authorization does not limit any employer from seeking additional information or disclosures from any applicant.

This form:

1. Authorizes current and past public school employers of the applicant/undersigned on this form, including applicants outside the State of Idaho, to release to the hiring school district all information relating to the job performance and/or job related conduct of the applicant and make available to the hiring school district copies of all documents in the previous employer's personnel file, investigative file or other files relating to the job performance of the applicant; and
2. Releases the applicant's/undersigned's current and past employers, and employees acting on behalf of the employer, from any liability for providing the above-mentioned information.

33-1210 RELEASE

I understand that the above requirements are a condition of my obtaining employment with the District and I consent to my current and former employers, both inside and outside the State of Idaho, upon receipt of this signed authorization, to comply with Idaho law. I further consent that such authorization may be provided to the hiring District via electronic means.

Signature of Applicant

Date

Printed Name of Applicant

Identifying Employee Number/Name of Applicant or
other Identifying Information for Past Employer

*Information obtained through the use of this release will be used only for the purpose of evaluating the qualifications of the applicant for employment. This information will not be disclosed in any manner other than as provided by Statute.

*A copy of this release and all other information obtained through use of this release will be placed into the applicant's personnel file with the District upon employment of the applicant, if any.

*An applicant's failure to disclose any former school district employer, whether within or outside of the State of Idaho, will serve as the basis for immediate termination and, for certificated personnel, may also result in the District's reporting of the individual to the Idaho Professional Standards Commission for a potential violation of the Code of Ethics for Professional Educators.

*By accepting an executed copy of this form, the hiring school district makes not guaranty or promise of employment to the applicant. Further, the hiring school district may employ the applicant on a conditional basis pending review of information gathered pursuant to this release. Such conditional employment is not a guarantee or promise of continued employment with the hiring school district for any length of time or pursuant to any additional conditions.