


SHELBYVILLE CENTRAL SCHOOLS

<p>APPLICATION FOR EMPLOYMENT</p> <div style="text-align: center;">  <p>SHELBYVILLE CENTRAL SCHOOLS AN EQUAL OPPORTUNITY EMPLOYER 803 St. Joseph St., Shelbyville, IN. 46176 317-392-2505</p> </div> <p>INSTRUCTIONS: 1. Please type or print legibly in black ink. 2. All areas must be completed for consideration. 3. MMDDYY stands for month, date, and year.</p>	<p align="center">TITLE OF POSITION</p> <p align="center">Check All That Apply</p> <table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> Bus Aide</td> <td><input type="checkbox"/> Instructional Assistant</td> </tr> <tr> <td><input type="checkbox"/> Bus Driver</td> <td><input type="checkbox"/> Maintenance</td> </tr> <tr> <td><input type="checkbox"/> Clerical</td> <td><input type="checkbox"/> Mechanic</td> </tr> <tr> <td><input type="checkbox"/> Custodian</td> <td><input type="checkbox"/> Substitute Teacher</td> </tr> <tr> <td><input type="checkbox"/> Food Service</td> <td><input type="checkbox"/> Other</td> </tr> </table>	<input type="checkbox"/> Bus Aide	<input type="checkbox"/> Instructional Assistant	<input type="checkbox"/> Bus Driver	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Clerical	<input type="checkbox"/> Mechanic	<input type="checkbox"/> Custodian	<input type="checkbox"/> Substitute Teacher	<input type="checkbox"/> Food Service	<input type="checkbox"/> Other
<input type="checkbox"/> Bus Aide	<input type="checkbox"/> Instructional Assistant										
<input type="checkbox"/> Bus Driver	<input type="checkbox"/> Maintenance										
<input type="checkbox"/> Clerical	<input type="checkbox"/> Mechanic										
<input type="checkbox"/> Custodian	<input type="checkbox"/> Substitute Teacher										
<input type="checkbox"/> Food Service	<input type="checkbox"/> Other										

APPLICANT PERSONNEL DATA

Name of Applicant (last, first middle)			Date:
Mailing Address (number and street)			
City	County	State	Zip Code
Date of Birth: (MMDDYY)	Highest Education Level:		
Eligible to Work in U.S. <input type="checkbox"/> Yes <input type="checkbox"/> No	Area Code and Telephone ()	Additional Telephone ()	
The School Corporation is requesting your Social Security number under authority of IC 4-1-8 to accomplish statutory purposes. Disclosure is mandatory and this form cannot be processed without it.			Social Security Number
Mark type(s) of employment acceptable to you: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary			

EDUCATION

List below all high schools and post high schools attended. A copy of applicable transcripts may be required at the time of the interview. Transcripts or High School Diploma are required if applying for a substitute teaching position

Name/Location of School	From (MO/YR)	To (MO/YR)	Fields of Study	Number of Semesters or Semester Hours Completed	Diploma (GED) or Type of Degree

SPECIALIZED TRAINING OR CLASSES RELEVANT TO THE JOB

Title of Specialized Courses	Company/School	Dates Attended	Credits Earned

CRIMINAL RECORD

Have you ever been convicted of a crime, other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide information regarding the conviction (offense, date, sentence) on a separate, attached sheet.	Notice: A "yes" response will not necessarily eliminate you from consideration for employment.
--	--

PROFESSIONAL CERTIFICATION

Are you currently certified, registered, or licensed in any profession in Indiana? (If yes, give complete information, including any license or registration number, and attach a copy of certificate if related to the position for which you are applying). <input type="checkbox"/> Yes <input type="checkbox"/> No	License or Registration Number	Date of Issue (MMDDYY)	Expiration Dat
If Applicable TRF #:			

Work Experience

1. List below, beginning with your most recent position, **all of your work experience**, and volunteer experience.
 2. **Experience that cannot be confirmed is not acceptable.**

Title of present or previous job:	From (MMDDYY):	To: (MMDDYY):	Approximate number of hours worked per week:
-----------------------------------	----------------	---------------	--

Name of Employer/Organization and Address (number and street, city, state, zip code)	Telephone Number (area code)
--	------------------------------

Name of Supervisor/Title:

Describe the duties of your position in order of importance. Indicate what machinery or office equipment was utilized.
--

Reason for Leaving:	Final Salary
	\$ _____ Per _____

Title of Previous Job:	From: (MMDYY)	To: (MMDDYY)	Approximate Number of Hours Worked per Week:
------------------------	---------------	--------------	--

Name of Employer/Organization and Address (number and street, city, state, zip code):	Telephone Number (area code):
---	-------------------------------

Name of Supervisor/Title:	Number and job types of the employees you supervised (if any) (Example: 3 managers, 2 clerks)
---------------------------	--

Describe the duties of your position in the order of importance. Indicate what machinery or office equipment was utilized.
--

Reason for Leaving:	Final Salary:
	\$ _____ Per _____

Title of Previous Job:	From: (MMDYY)	To: (MMDDYY)	Approximate Number of Hours Worked per Week:
------------------------	---------------	--------------	--

Name of Employer/Organization and Address (number and street, city, state, zip code):	Telephone Number (area code):
---	-------------------------------

Name of Supervisor/Title:	Number and job types of the employees you supervised (if any) (Example: 3 managers, 2 clerks)
---------------------------	--

Describe the duties of your position in the order of importance. Indicate what machinery or office equipment was utilized.
--

Reason for Leaving:	Final Salary:
	\$ _____ Per _____

Have you ever been discharged by any employer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
--	------------------------------	-----------------------------

Name of Reference:	Area Code and Telephone Number:
	(_____)

Address (number and street, city, state, zip code):

Name of Reference:	Area Code and Telephone Number:
	(_____)

Address (number and street, city, state, zip code):

Name of Reference:	Area Code and Telephone Number:
	(_____)

Address (number and street, city, state, zip code):

Would you be willing to substitute in the custodial or food service areas?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
--	------------------------------	-----------------------------

If you are applying for a substitute teaching position, please indicate desired grade levels:

BACKGROUND INFORMATION	YES	NO
------------------------	-----	----

Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer or have you offered a resignation to your previous employer because you were under investigation for misconduct?		
Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position?		
Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of your sexual contact with another person, of mishandling funds or of criminal conduct resulting in a conviction or criminal penalty?		
Have you ever pleaded guilty or "no contest" (nolo contendere) to, or been convicted of any crime of moral turpitude? (Moral turpitude is an act of baseness, vileness, or depravity in the private and social duties which a person owes another member of society or society in general and which is contrary to the accepted rule of right and duty between persons, including, but not limited to, theft, attempted theft, murder, rape, swindling and indecency with a minor.)		
Have you (a) ever been convicted of a crime, other than a minor traffic offense, or (b) ever entered a plea of guilty or a plea of "no contest" (nolo contendere), or has any court ever deferred further proceedings without entering a finding of guilty and placed you on probation, for any crime other than a minor traffic offense?		

If you answered "Yes" to any of the above questions, please provide a detailed explanation and accompanying court documentation, if applicable.