

LANDER COUNTY SCHOOL DISTRICT

P.O. Box 1300 625 Weaver Avenue Battle Mountain, Nevada 89820

PH: (775)-635-2886 FAX: (775)-635-5347

APPLICATION FOR EMPLOYMENT

Applicant's Full Name _____
(Last) (First) (MI)

Other Name(s) _____
(Please provide any additional information relative to change of name, use of an assumed name, maiden name, or nickname, necessary to enable a check on your work or school record.)

Present Mailing Address _____
(Street) (City) (State) (Zip)

Permanent Mailing Address _____
(Street) (City) (State) (Zip)

Telephone Numbers:
Present: () Permanent: () Work: ()

My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitations hereby release the school district and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local Sheriff, information from the Central Criminal Records Exchange of either date on all criminal convictions or certification that no date on criminal convictions are maintained, information from the State Department of Social Services Child Protective Services Unit and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, false answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Date _____ Signature of Applicant _____

MARK THE APPROPRIATE BOXES:

INDICATE POSITION(S) DESIRED FOR WHICH YOU ARE ENDORSED

- | | | |
|---|--|--|
| <input type="checkbox"/> New Application | <input type="checkbox"/> Teacher | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Previous Application on File | <input type="checkbox"/> Guidance | <input type="checkbox"/> Supervisor |
| <input type="checkbox"/> Former Employee of School District | <input type="checkbox"/> Library/Media | <input type="checkbox"/> Psychologist |
| | <input type="checkbox"/> Other (Explain) _____ | |

List grade level(s) and/or subject area(s) in order of preference:

Are you a U.S. citizen?
 Yes No

If not, are you eligible to work in the U.S.?
 Yes No

LCSD is an Equal Employment Opportunity employer. In compliance with applicable disability laws, reasonable accommodations may be provided for qualified individuals with a disability who require and request such accommodations.

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I. EDUCATIONAL AND PROFESSIONAL TRAINING (List Chronologically.)

Level of Education	Name of School or University	State	Field of Study	Degree	Did you graduate?
High School					Yes <input type="checkbox"/> No <input type="checkbox"/>
College or University					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>
					Yes <input type="checkbox"/> No <input type="checkbox"/>

II. STUDENT TEACHING EXPERIENCE (List Chronologically and include any internships.)

Name of School	School District	State	Grade Level/Subject	Dates

III. TEACHING EXPERIENCE (List Chronologically. DO NOT INCLUDE SUBSTITUTE TEACHING.)

School District/ School	Supervisor/Administrator	State	Position Held Grades/Subject Taught (Specify)	Dates Mo./Day/Yr.	Total Years	Full Time (X)	Part Time (X)

IV: WORK EXPERIENCE OTHER THAN TEACHING (List Chronologically/attach a sheet if needed.)

Employer	City/County	State	Kind of Work	Dates of Employment	Supervisor Name and Phone Number

V: MILITARY EXPERIENCE

Branch of Service	Occupational+ Specialist (MOS)	Inclusive Dates	Type of Discharge

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VI. CERTIFICATION

A. If you have been issued a Nevada certificate, please submit a photocopy.....Copy enclosed? No Yes
Year of Expiration of Nevada Certificate _____

Provisions _____

Endorsement(s) _____

Have you applied for a Nevada certificate? Yes No When _____

B. If you have been issued a certificate in another state, please submit a photocopy.....Copy enclosed? No Yes

State _____ Expiration Date _____

Certificate/Endorsements _____

State _____ Expiration Date _____

Certificate/Endorsements _____

C. Have you taken the National Teacher's Examination? (If yes, please submit a copy of your scores.)

Core Battery: No Yes _____ Copy enclosed? No Yes

Month/YR CS GK PK

Specialty Area: No Yes _____ Copy enclosed? No Yes

Month/YR Subject Source

VII. GENERAL INFORMATION

Month, Day, and Year Available for employment _____ Are you under contract? Yes No

If yes, where? _____ Present Position _____

If presently employed, why do you wish to change? _____

If under contract, what type: Annual/Probationary Other _____ Continuing/Tenure

If under contract have you checked and can you be released if you are offered another position? _____ Yes No

If not under contract now, have you ever held a continuing contract in Nevada?..... Yes No

If yes, cite school district(s) and date(s) _____

Referral Source: Advertisement/Posting Employee Friend Other (Explain) _____

Have you ever:

#1 Been dismissed from a position? Yes No

#2 Been asked to resign from a position? Yes No

#3 Been refused continuing employment? Yes No

#4 Been investigated for misconduct related to your employment? Yes No

#5 Had a professional certificate, credential or license (of any kind) revoked or suspended, or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards or conduct. Are there any pending adverse actions against you? Yes No

#6 Been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct? Yes No

#7 Surrendered a professional license of any kind before its expiration? Yes No

#8 Been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure? Yes No

#9 Failed to complete a contract for educational services in any educational or school-related position? Yes No

#10 Been placed on leave by your employer or left such employment prior to the end of the contract term? Yes No

#11 Had a contract non-renewed, non-extended or been dismissed from employment? Yes No

#12 Resigned in lieu of contract non-renewal, non-extension, or termination of employment? Yes No

#13 Reached an agreement that seals your personnel file and other records? Yes No

#14 Received an unsatisfactory evaluation? Yes No

#15 Do you currently have a "Letter of Admonition" in your file? Yes No

If yes, please explain and note question number you are referencing in your response:

If you answer 'Yes' to any of the questions below, please use the box provided to give a detailed explanation, including the date of the charge, the court action, and the address of the court involved. Please note that a "Yes" answer to these questions may not necessarily disqualify you from consideration for employment.

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Have you ever:

- #1 Been convicted, pled guilty, or pled nolo contendere to a criminal offense, other than a minor traffic violation (this includes, but is not limited to a felony, gross misdemeanor, misdemeanor, DUI, etc.)? [] Yes [] No
- #2 Been arrested (even if no contest or charges dropped or pled down) for a sex related offense? [] Yes [] No
- #3 Been charged (even if no contest or charges dropped or pled down) for a sex related offense? [] Yes [] No
- #4 Been convicted (even if no contest or charges dropped or pled down) for a sex related offense? [] Yes [] No
- #5 Been arrested (even if no contest or charges dropped or pled down) for a drug related offense? [] Yes [] No
- #6 Been charged (even if no contest or charges dropped or pled down) for a drug related offense? [] Yes [] No
- #7 Been convicted (even if no contest or charges dropped or pled down) for a drug related offense? [] Yes [] No
- #8 Been arrested for an act of violence, including domestic violence? [] Yes [] No
- #9 Been charged with an act of violence, including domestic violence? [] Yes [] No
- #10 Been convicted of an act of violence, including domestic violence? [] Yes [] No
- #11 Had a report of child abuse or sexual activities involving a K-12 student or minor filed against you with a school district, a state or federal agency, a police agency, or in court? [] Yes [] No

If yes, please explain and note question number you are referencing in your response:

VIII. REFERENCES

It is the applicant's responsibility to have the following information provided the School District in order to be considered for employment:

- A. The names of at least three reference sources must be provided and must include current employer if employed, or last employer if not currently employed.
- B. Unless included in Placement File, applicants with work experience must provide recommendations from principals and/or superintendents from all contracted educational work experiences within the past three years. If experience was not within the past three years, provide references from last contracted experience.
Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and co-operating teacher(s) in the placement file or by listing names below.
- C. As indicated above, [] a Placement File is being sent, and/or [] references are listed below:

NAME OF REFERENCE	POSITION/RELATIONSHIP	MAILING ADDRESS	PHONE NUMBER
1.			
2.			
3.			

IX. EXTRACURRICULAR ACTIVITIES

Indicate the number of years experience in the activities listed below. Circle activities you are willing to coach/sponsor:

Extra Curricular Activities	High School Experience	College Experience	Contracted Experience	Extra Curricular Activities	High School Experience	College Experience	Contract ed Experience
Football				Act. Director			
Basketball				Ath. Director			
Baseball				Ath. Trainer			
Softball				Forensics			
Track				Debate			
Cross Country				Drama			

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Wrestling				Yearbook			
Gymnastics				Newspaper			
Field Hockey				Literary Magazine			
Golf				Student Government			
Tennis				Honor Society			
Volleyball				Clubs			
Soccer				Cheerleaders			

X. OTHER INFORMATION

To avoid conflict of interest, list any local school board member or employee relative(s) in the school district and cite relationship

Estimate your total absence from work or school for the last three years and explain the reason(s) _____

In your own handwriting, provide any additional information you desire that will afford an additional understanding of your qualifications. Your goals, objectives, philosophy, and other background factors are of special interest.

ADDITIONAL REMARKS AND/OR EXPLANATIONS FROM SECTION VII GENERAL INFORMATION

LCSD is an Equal Employment Opportunity employer. In compliance with applicable disability laws, reasonable accommodations may be provided for qualified individuals with a disability who require and request such accommodations.