

LANDER COUNTY SCHOOL DISTRICT

P.O. Box 1300 450 E 6th Battle Mountain, Nevada 89820

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

HR Contact: Cassandra Ortiz - HR@landernv.net

APPLICATION FOR EMPLOYMENT - CERTIFIED

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: _____ Work: _____ Email: _____

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 of 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:

- New Application
- Previous Application on File
- Former Employee of School District

INDICATE POSITION(S) DESIRED FOR WHICH YOU ARE ENDORSED

- Teacher
- Guidance
- Library/Media
- Other (Explain) _____
- Administrator
- Supervisor
- Psychologist

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

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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.

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"/>

STUDENT TEACHING EXPERIENCE (List chronologically and include any internships.)

Name of School	School District	State	Grade Level/Subject	Dates

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)

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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

MILITARY EXPERIENCE

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

CERTIFICATION

A. If you have been issued a Nevada certificate, please submit a photocopy.....Copy enclosed? No Yes

B. Year of Expiration of Nevada Certificate

Provisions

Endorsement(s)

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

C. 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

GENERAL INFORMATION

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

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) [] _____

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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 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:

Applicants should be advised that a criminal record will not necessarily disqualify you from employment with the district. Instead, the District will consider the following five factors concerning an applicant's criminal records, if an applicant does have a record.

- 1: How much time has passed since the conviction;
- 2: How old the applicant was at the time of the offense;
- 3: The severity and nature of the offense;
- 4: How the crime relates to the job that the applicant is applying for; and
- 5: Evidence that the applicant has been rehabilitated.

The District will consider these facts when an applicant has a record that indicates that the applicant has been convicted of a misdemeanor for which he or she served time in jail or prison, was arrested and the arrest led to a conviction, or otherwise has been convicted of or plead no contest to a felony charge. The District will also consider any criminal charges filed in the six months immediately preceding the applicant is filing of his or her application.

Please be advised that if an applicant's criminal background is the basis for the District's ultimate decision not to hire the applicant, the District will notify the applicant of this fact and allow the applicant an opportunity to explain the circumstances of the conviction and/or challenge the contents of the criminal record.

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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.			

Please include your last (3) employment evaluations with submission of application

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

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OTHER INFORMATION

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

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 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.