### Napoleon Community Schools TEACHER APPLICATION

Present Address:					
	Telephone:				
Social Security Number:					
Citizen of U.S.: \( \sum \text{YES}					
Position Desired:				Full Time:	Part Time:
Course Qualified To Teacher by C	ertification: MAJ	OR:			
Type of Certificate:  Date of Expiration:			Continuing	Elemento	ary Secondar
Are you certified or licensed in any	skill or professio	n:	If yes, which s	skill or professio	n
Are you currently employed? Name & Address of Present Emplo	oyer:	_ Present or L	ast Salary:		
When may present employer be co	ntacted?				
f teaching, are you under contract					
When would you be available for a J.S. Military Experience:	pei soliai illiei viev	V F	Length of Service	e:	
EDUCATION & PROFESSIONAL	TRAINING:				
List High Schools, Colleges & Universities Attended			Degrees Received		Area of Study
	higher degree?	I	fyes, what is your	expected comp	letion date and degre
are you presently working toward o xpected?					

Name of School	RIENCE: (Do not list Subjects Taught	<del></del>	: From - To	Highest S Receiv	Salary	Name of Supervisor	Reason For Leaving
T-1-3  1-0-4							
• .	rience – school years CE OTHER THAN T		 G:	Company of the second			
Name of Company			Nature o	of Work	Emplo	yment Dates	Reason For Leaving
REFERENCES: D	o not list references	included i	in vour College	e Credential:	s. Include	three character	r references.
	ime		Posit				Telephone Number
LIST THREE PROF	FSSIONAL REFER	ENCES:					
Na			Posit	tion		Address \$	Telephone Number

LIST COLLEGE EXTRA-CURRICULAR ACTIVITIES, HOBBIES & SPECIAL INTERESTS:

EXPERIENCE WORKING WITH STUDENTS: List experiences you have had working with young people (other than teaching) – such as Scout work, Summer Camps, etc.

LIST PRESENT & PAST MEMBERSHIPS IN PROFESSIONAL CLUBS, SOCIETIES OR ORGANIZATIONS:

Organization	Location	Dates of Membership
List any books, articles, etc., that you have	authored:	
Have you ever been convicted of a crime? _	If so, where and the nature o	of the offense.
(Note: A conviction record will not necessar	rily be a bar to employment.)	
	t and a self-the confloant	
The Applicant hereby consents that any form		whether named in this application of hot,
may release all employment records of the a	pplicam to the District.	
I hereby authorize the district to inquire and	verify any information contained on this	application for employment, and the
district shall not be liable for any damages w		
misleading or untruthful statement on this a		
this application will become a permanent par		
This approach the second a permanent per	, <b></b> , <b>, , ,</b>	
Signature (Full Name)	Date	
In compliance with Federal and State equa	al opportunity laws, qualified applicants	are considered for all positions without
regard to race, color, religion, sex, natio	nal origin, age, marital status, or the	e presence of a non-job-related medical
condition or handicap.		

# Napoleon Community Schools APPLICATION FORM Attachment A

(Must be Signed and Included with All Applications)

#### Notice of Handicapper Rights

Michigan law requires that you notify the Napoleon Community School District in writing within 182 days after you know or should have known that an accommodation for a handicap will be necessary to permit you to perform the duties of the position for which you are applying.

#### Notice of Medical Examination

Any job you are offered by the Napoleon Community School District will be conditional on the results of a medical examination if one is requested by the Napoleon Community School District. The medical exam will be completed before you begin work on your job.

#### APPLICANT'S CERTIFICATION AND AGREEMENT

Read the following carefully before signing this application for employment

#### 1. Certification of Truthfulness:

I certify that all statements on this Application for Employment are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false, will be sufficient reason for not being employed or if employed, may result in my dismissal.

## 2. <u>Pre-employment and Investigation Applicant Acknowledgement, Authorization, Consent, and Release:</u>

I, the undersigned Applicant for employment with Napoleon Community Schools, do hereby acknowledge, authorize, and consent to a pre-employment investigation to be conducted by agents of Napoleon Community Schools for the purpose of confirming and verifying the contents of my application for employment, resume, and/or letter of interest submitted by me and/or to confirm or verify any verbal representations made or to be made by me with respect to my consideration for employment with Napoleon Community Schools. Further, I do hereby acknowledge, authorize, and consent to agents of Napoleon Community Schools to contact any or all of my personal references, former or current employers, and any other persons and organizations deemed necessary by the investigating agents for the purpose of making preemployment inquires and obtaining information concerning my character, reputation, and/or work record and experience.

Also, I do hereby authorize and consent to agents of Napoleon Community Schools to contact any child protection agencies or registries, law enforcement authorities, and/or judicial authorities and to make pre-employment inquiries and to obtain any information and/or records related to me to determine if I have committed or have been convicted of any crimes and if there are any felony charges pending, including the nature of the crimes committed and/or the pending felony charges.

I hereby authorize and consent to the release of any information, written or verbal, and/or any documentation regarding my character, reputation, work record and experience from any person

including my present and/or former employers, upon the request of the agents of Napoleon Community Schools conducting the pre-employment investigation.

I do hereby waive written notice of the disclosure of any disciplinary reports, reprimands, and/or actions from my current or former employers.

Also, I do hereby release any person providing information and/or documents concerning my character, reputation, and/or work record and experience to agents of Napoleon Community Schools pursuant to the pre-employment investigation from any and all claims and/or liability whatsoever for any damages and/or consequences which may result therefrom.

I do hereby release Napoleon Community Schools, its individual Board members, employees, and/or agents from any and all claims and/or liability whatsoever for any damages or consequences which may result from the pre-employment investigation and/or physical examination, including the drug screening test (if applicable), related to my consideration for employment with Napoleon Community Schools.

READ CAREFULLY, THIS DOCUMENT CONTAINS A RELEASE.

	Date	(Full Name – Please Print)			
WITNESSES:		SIGNAT URE			
		Signature of Applicant			
3.	appropriate releases for that purpose. In additional substance screening test and to all searched are	amination by the district's physician and to execute on, I agree to submit to a pre-employment nd substance testing if requested by the district. I r testing the district believes will assist in hiring or			
1.		e to execute an authorization for this employer to secure criminal conviction history and of referrals to first offender programs from the appropriate law enforcement agency, should			
	Signature of Applicant	Date			

Napoleon Community School District is an equal opportunity employer

Return application and all materials to:

James E. Graham, Superintendent Napoleon Community Schools 200 West Street, P.O. Box 308 Napoleon, MI 49261 (517) 536-8667