



International School of Indiana

Employment Application

Please print all information

TO APPLICANT:

The policy of The International School of Indiana is to provide equal employment opportunities as required by law to all individuals, regardless of race, age, color, religion, sex, sexual orientation, gender identity, disability, national origin, genetic information, veteran status, and any other legally-protected category.

This Application will only be effective for 90 days from the date signed. To be considered for employment after that date, a new Application must be completed. You are also responsible for ensuring that all information in this Application or in any other material submitted to us is accurate and complete before any hiring decision is made and before the first day of employment if you accept an offer of employment.

You may be required to take a pre-employment drug test. Do not apply unless you can pass this test.

Name: _____ Soc. Sec. #: XXX-XX-_____ Date: _____

Current Address: _____
Street City Country

Phone Number (_____) _____ E-mail Address: _____

Emergency Contact Name: _____ Phone Number: _____

Are you currently employed? Yes No If Yes, may we contact your current employer? Yes No

If no, please explain why we may not contact your current employer _____

Have you ever been convicted of a crime in any state, province, or country (including, but not limited to, felonies, misdemeanors, guilty pleas, no-contest pleas, diversion arrangements, or pleas of *nolo contendere*), other than convictions that were ordered expunged or sealed by a court or statutorily eradicated (do not include minor traffic offenses unless you are applying for a position in which driving is one of the essential functions). Note: a DUI (driving under the influence of alcohol or other substance) should be disclosed.

Yes No

If yes, please explain and provide all details including the nature of each crime for which you were convicted. This should include the date of the conviction, the sentence and penalty imposed, the type of rehabilitation you engaged in, and anything else that you would like us to consider. Please use the separate sheet attached (Confidential Criminal Conviction Disclosure) for this response.

Notice to Applicants Regarding Prior Convictions: A prior conviction does not automatically disqualify a candidate from being considered for employment. The type of conviction and when it occurred will be considered. In addition, we will not deny employment due to a prior conviction unless: (a) there is a direct relationship between one or more previous criminal offense and the employment sought; or (b) granting employment would involve an unreasonable risk to property or to the safety or welfare of others. In making this determination, we will consider: (a) the specific duties and responsibilities necessarily related to the employment sought; (b) the bearing, if any, the criminal offense(s) for which you were previously convicted will have on your fitness or ability to perform one or more such duties or responsibilities; (c) the time that has elapsed since the criminal offense(s) occurred; (d) your age when they occurred; (e) the seriousness of the offense(s); (f) any information you produce to us or that is produced on your behalf in regard to your rehabilitation and good conduct; and (g) our legitimate interest in protecting the safety and welfare of our students, employees, others, and our property.

Do you have permanent work authorization (you might have permanent work authorization as a U.S. Citizen, a Permanent Resident Alien, Refugee or Asylee, or as a Temporary Resident Alien under the Immigration Reform and Control Act)? (If "No," please explain and also note that proof of citizenship or immigration status will be required upon employment.) Yes No

Do you have any relatives who are current employees of or associated with the School? _____ If yes, who? _____

Are you 18 or older? Yes No

EDUCATION:

	School	Address	Number of Years	Major	Degree Received
High School					
College					
Graduate/ Professional					
Trade/Business /Other					

Describe any specialized Licenses, Certifications, or Training programs you have completed.

Licenses and Certifications:

Trainings and other Specialized Skills:

List all present and past employment information, beginning with the most recent. All times must be accounted for, including periods of unemployment. Please do not state, "See resume or c.v." Please attach an additional sheet if necessary.

COMPANY OR ORGANIZATION NAME ADDRESS AND TYPE OF BUSINESS	FROM		TO		TITLE AND JOB DUTIES	ENDING SALARY	REASON FOR LEAVING	NAME, TITLE & PHONE NUMBER OF YOUR SUPERVISOR
	Month Year		Month	Year				

Have you ever been terminated from employment or asked to resign by any employer, other than those listed above?

Yes No

(If yes, please provide name of employer, location, date, and explanation on a separate sheet.)

APPLICANT CERTIFICATION AND AGREEMENT

I certify that all information I have provided to The International School of Indiana ("School") in this Employment Application ("Application") and other material submitted to the School in connection with the hiring process is true, complete and correct. I understand that any information provided by me that the School determines was false, incomplete, or misrepresented in any respect, shall result in: (i) cancellation of further consideration for employment; or (ii) if hired, the immediate termination of my employment, regardless of the date of the School's discovery of such information.

I expressly authorize, without reservation, the School, its employees, and agents to contact and obtain information regarding me from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this Application, resume, job interview, and other material submitted in connection with the hiring process. I hereby waive and release any and all rights and claims I may have against the School, its employees, and agents in regard to their seeking, gathering, and/or using such information in the employment process and I also waive and release any and all rights and claims I may have against all other persons, corporations, or organizations for furnishing such information about me.

I understand that this Application remains current for only 90 days. At the conclusion of that period, if I have not been hired by the School and still wish to be considered for employment, it will be necessary to reapply and fill out a new Application. In addition, I agree that I am obligated to update this Application in order to ensure that all information is complete and accurate before any hiring decision is made by the School and before my first day of employment if I accept an offer of employment.

If I am hired, I understand that I will be an at-will employee and, therefore, may resign at any time, with or without cause and without prior notice, and the School has the right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. I understand that no agreement has been made to hire me. I understand that no representative of the School is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Head of School.

In consideration of the School's review of this Application, I hereby agree that: (a) any claim, action or lawsuit against the School, its employees, or agents ("School Group") arising out of or relating to the hiring process, my employment, or termination of employment, including, but not limited to, any claim or action for employment discrimination or arising under any Local, State, or Federal civil rights law, must be filed in a court of competent jurisdiction or with any state or federal agency having jurisdiction over such matter within 180 calendar days of the event giving rise to the claim or be forever barred, and I knowingly and voluntarily waive any statute of limitations or other period to the contrary; and (b) I knowingly and voluntarily waive any right that I may have to a jury trial in connection with any claim or action for employment discrimination or arising under any Local, State, or Federal civil rights law against School Group relating to the hiring process, my employment, or the termination of that employment, including, without limitation, any claim or action relating to employment discrimination. This means that any such claim or action will be heard by and tried before a judge. I am unequivocally waiving each of the above-described rights knowingly and voluntarily.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT CERTIFICATION AND AGREEMENT.

I certify that I have read, fully understand, and agree to the foregoing Applicant Certification and Agreement. I have had a sufficient opportunity to ask any questions about the above, and I have signed below voluntarily.

Signature of Applicant: _____

Date: ___/___/___

International School of Indiana is an EQUAL OPPORTUNITY EMPLOYER

CONFIDENTIAL CRIMINAL CONVICTION DISCLOSURE

Name: _____ Position applying for: _____

Explain: dates, type of conviction(s), in chronological order:

Explain: nature of offense(s) leading to conviction(s):

Explain how recently such offense(s) was/were committed, sentence(s) and penalty(ies) imposed:

Explain type(s) of rehabilitation:

Provide any other information you want the School to consider: [attach separate page if necessary]

Signature of applicant: _____

Printed Name: _____

Date: _____