



270 Mayfield Road
Clarion, PA 16214
Phone: 814-226-7103
Fax: 814-226-4850
www.riu6.org

PERSONAL INFORMATION

Name: _____

Email Address: _____

Permanent Address:

Current Address:

P O Box or Street

P O Box or Street

City/State Zip

City/State Zip

Telephone () _____

Telephone () _____

Position(s) Desired

Check status desired Full-time Substitute Part-time

Referral Source Advertisement Employee Relative
 Walk In Other

It is the policy of the Riverview Intermediate Unit not to discriminate on the basis of sex, disability, race, age, color, or national origin in its educational and vocational programs, activities or employment as required by Title IX, Section 504 and Title VI. For information relevant to this policy contact the Administrative Assistant for Personnel of Riverview Intermediate Unit 6, 270 Mayfield Road, Clarion PA 16214.

Have you worked for Intermediate Unit 6 before? No Yes When _____

Have you applied before? Yes No

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EDUCATIONAL BACKGROUND

	Name & Location	Credits Received	Degree/Diploma or Certificate	Subject
High School				
College or University				
Graduate School				
Other				

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CERTIFICATION DATA (If Applicable)

Type Code	Years Valid	Date Issued	Area of Certification	State

If you do not presently have an Instructional II certificate, how many years of the above teaching experience are you claiming toward your Instructional II certificate? _____ years

Have you acquired tenure in Pennsylvania? _____
If yes, in which school district? _____

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Attach a photocopy of certificate(s). Certification is the responsibility of the applicant/employee. Applicants seeking employment by the Riverview Intermediate Unit must possess a valid Pennsylvania Certificate for the position for which they are applying. A copy of such certificate must be filed with the personnel office. It is recommended that a copy of the certificate be filed with this application. Upon employment the certification must be kept valid as may be required by Pennsylvania Laws and/or regulations. A person whose application and/or records or certificate has been falsified and/or who does not possess a valid certificate will be subject to immediate dismissal.

PROFESSIONAL EXPERIENCE WITHIN A SCHOOL DISTRICT (If Applicable)

Position	Name & Address of Employer	Contact Number

YOU MAY CONTACT MY PRESENT EMPLOYER Yes No

Section 1418 of the Pennsylvania School Code requires a pre-employment physical examination and evidence of a tuberculosis test within a two-year period. Before employment, evidence of such examination and test must be filed in the personnel office. Forms may be secured in the personnel office. No one may begin work before completing these examinations.

Section 111 of the Pennsylvania Public School Code of 1949 requires background checks for current and prospective employees of intermediate units, including independent contractors and their employees, except those employees and independent contractors and their employees who have no direct contact with children. The following background checks are required under the School Code: 1) PA State Police Criminal History; 2) Department of Human Services Child Abuse History Clearance; and, 3) Federal Criminal History Record Information (FBI Report). These background checks must be no more than five years old at the time of application.

OTHER WORK EXPERIENCE

NAME _____ JOB TITLE _____
 ADDRESS _____ FROM _____ TO _____

NAME _____ JOB TITLE _____
 ADDRESS _____ FROM _____ TO _____

NAME _____ JOB TITLE _____
 ADDRESS _____ FROM _____ TO _____

NAME _____ JOB TITLE _____
 ADDRESS _____ FROM _____ TO _____

Have you been convicted of a felony?: (Such conviction may be relevant if job related, but does not bar you from employment.) No Yes, please explain _____

REFERENCES (List at least three who are not related to you)

NAME _____ POSITION _____
ADDRESS _____ TELEPHONE _____

NAME _____ POSITION _____
ADDRESS _____ TELEPHONE _____

NAME _____ POSITION _____
ADDRESS _____ TELEPHONE _____

NAME _____ POSITION _____
ADDRESS _____ TELEPHONE _____



The facts set forth in my application for employment are true and complete and I understand that, once submitted to the Personnel Office, this application becomes the property of IU #6. All applications will be held one year from the date of the application.

I understand that, if employed, any misrepresentation of information on this application or any supplement thereto shall be sufficient cause for dismissal of my employment.

Riverview Intermediate Unit has instituted a Policy for Drug and Substance Abuse which prohibits the unlawful manufacture, distribution, dispensing, possession, and use of a controlled substance in the IU #6 assigned workplace, and requires any employee to notify the personnel office of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) days after such conviction.

I further authorize the Intermediate Unit to investigate my background now or in the future, to verify the information provided, and release from liability all persons and/or corporations supplying information concerning my background. Information submitted on or as part of this statement shall be accorded confidentiality as required by applicable regulations of the Pennsylvania Department of Education. This statement is made subject to the penalties of 18 PA C.S. s4904 relating to unsworn falsification to authorities.

Date _____ Signature _____