

FREEBURG COMMUNITY CONSOLIDATED SCHOOL DISTRICT #70 TEACHER APPLICATION

APPLICATION PROCEDURE:

Interested and qualified candidates should submit this form along with the items listed below.

1. A personal letter of interest or cover letter
2. A current resume
3. A copy of a valid Illinois Elementary Certificate
4. College or university placement credentials/transcripts
5. Three letters of recommendation

All applications and supporting material should be forwarded to:

Dr. Melanie Brink, Superintendent
408 South Belleville Street
Freeburg, IL 62243

PERSONAL INFORMATION:

Last Name	First Name	Middle Name
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Street Address	City	State	Zip
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Home Phone: _____ Social Security Number: _____

EDUCATIONAL BACKGROUND:

Institution and Location	Years Attended	Degree	Major/Minor

PROFESSIONAL INFORMATION:

Do you hold or qualify for an Illinois Elementary Education License? _____

Endorsements and/or other Certifications Held (Type and State)

Previous Salary _____ Date Available _____

CURRENT EMPLOYMENT:

Name of Current Employer _____

Present Position _____ Length of Present Position _____

Total pupils enrolled _____ Number of Certified Staff _____

PROFESSIONAL EXPERIENCE:

List all employment since receipt of the Baccalaureate degree both within and outside of the field of education, beginning with the most recent.

Employer and Location	Position	Dates: From/To	Reason for Leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

HONORS AND DISTINCTIONS:

List degrees, honors, awards, commendations, elective or appointive offices held or other distinctions received.

Date	Honors, Degrees, etc. (Include source, institution, etc.; comment as appropriate.)
_____	_____
_____	_____
_____	_____

COMMUNITY LEADERSHIP ACTIVITIES:

List those in which you have been most active and indicate the nature of the activity and its contribution to the community.

REFERENCES:

Please list three references who are knowledgeable of your work at your current position.

Name	Address
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Position	Business Phone	Home Phone
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Name	Address
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Position	Business Phone	Home Phone
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Name	Address
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Position	Business Phone	Home Phone
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Authorizations and Release Form

1. ___Yes No___ Are you presently being investigated or under procedure to consider your discharge for misconduct by your present employer?
2. ___Yes No___ Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position?
3. ___Yes No___ Have you ever resigned from a prior position without being asked, but under circumstances involving your employer’s investigation of sexual conduct with another person, mishandling of funds, or criminal conduct?
4. ___Yes No___ Have you ever been charged with or investigated for physical or sexual abuse of anyone?
5. ___Yes No___ Have you ever been charged with, pleaded guilty or “no contest” to, or been convicted of any crime involving sexual abuse of any persons or of any other crime of moral turpitude?
6. ___Yes No___ Have you ever been convicted of a misdemeanor and/or felony, or ever entered a plea of guilty or a plea of “no contest”, or has any court ever deferred further proceedings without entering a finding of guilty, or placed you on probation for any crime?

If you have checked “yes” to any of these questions, please explain on a separate sheet of paper, including the date of the incident, charge, any court action taken, the offense in question, and the address of the court involved.

I hereby grant authorization to the Freeburg Community Consolidated School District #70 to check my employment history, including without limitation, information pertaining to my employment from any of my present or former employers, supervisors, or co-workers in any bona fide school corporation; reference and credit checks, and to seek the release of investigative information, including a "criminal history record check" by any private or public employers, or local, state, or federal agencies to provide the Freeburg Community Consolidated School District #70 any information they may release concerning the matter described herein, and will cooperate to the extent necessary to obtain the release of this information.

I expressly waive in connection with any request for, or provision of such information, any claims or causes of action, including without limitation, defamation, infliction of emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against the Freeburg Community Consolidated School District #70, its officials, employees, trustees, or agents, any individual, corporate, and/or agency provider of such information. I have read this authorization and release of all claims, and expressly agree to the terms set out herein.

Date _____ Applicant's Signature _____

Should this application be treated as confidential with regard to your present employer? Yes or No