

Paton-Churdan Community School DAYCARE APPLICATION FORM

POSITION FOR WHICH APPLICATION IS MADE: _____

A. PERSONAL INFORMATION (please respond to each item)

(Last Name)	(First Name)	(Middle Initial)
Home Address		
City, State, Zip		
Work Address		
City, State, Zip		
(Home Phone)	(Work Phone)	(Cell Phone)
(Email Address)	(Date Application Submitted)	

B. CURRENT POSITION (please respond to each item)

(Present Title)	(Current Position Held)
Employer	
Employer Address	
City, State, Zip	
(Date Started)	(Date Left)
(Present Salary)	(Salary on Leaving)
(Name/Title of Supervisor)	(Reason for Leaving)

C. EDUCATIONAL BACKGROUND

Please list the high schools, colleges or universities you have attended and the degrees received. List them in order, beginning with the most recent.

Name/Location of School	Year (s)	Degree	Diploma/Degree
High School-			
College-			
College-			
Other Training-			
Certifications-			

D. WORK HISTORY—Please list three individuals who are very familiar with your work and who may be contacted.

Name of Individual	
Title	
Business Phone	
Dates Employed	
Reason for Leaving	

Name of Individual	
Title	
Business Phone	
Dates Employed	
Reason for Leaving	

Name of Individual	
Title	
Business Phone	
Dates Employed	
Reason for Leaving	

E. BACKGROUND INFORMATION—If you answer “yes” to any of the following questions, please attach a written response describing, in detail, an explanation of the circumstances involved:

1. Have you ever been convicted of a violation of law other than a minor traffic violation? (The term “conviction” includes any conviction, a guilty plea, a plea of no contest, a suspended sentence, a deferred sentence, a deferred judgment, or a finding of guilt by a jury or judge.)
 yes no
2. Have you ever been terminated or discharged, or resigned at the request of your employer from any job related to this position?
 yes no
3. In connection with your work responsibilities, have you ever been the subject of a complaint or been disciplined by a court of any state?
 yes no
4. Are you currently under investigation, by any regulatory body, for any alleged misconduct or other alleged grounds for discipline?
 yes no
5. Has there been any incident that could negatively affect your ability to work in this district?
 yes no

F. CURRENT EMPLOYMENT STATUS

1. Are you authorized to work in the U.S. on an unrestricted basis?
 yes no
2. Have you worked for the Paton-Churdan Community School in the past?
 yes no If so, in what capacity _____
3. Are there any hours, shifts or days you cannot or will not work?

4. When can you start employment? _____

G. AUTHORIZATION—Please read carefully and then sign your name if you agree to the terms.

I hereby certify that the statements made by me in this application and all related information which I have provided are true, accurate, and complete to the best of my knowledge. I understand that if I provide any false, inaccurate, or incomplete information, I will not be eligible for employment, or if I am hired, I will be subject to disciplinary action or dismissal regardless of the date on which the District discovers the violation of its policy regarding application form dishonesty.

Signature of Applicant

Date

H. ADDITIONAL AUTHORIZATION—Please read carefully, then sign and date.

I specifically authorize the Board of Directors, or its agents, with respect to this application to contact my references, to investigate my background, and to make such other inquiries as the Board in its discretion deems relevant to assess my qualifications for the this position. I authorize former employers, my references or any other person contacted by the Board or its agents in investigating the merits of my application to disclose personnel records and appraisals of my performance or information about my qualifications for this position and release them from any liability for such disclosure.

I further understand that if I apply for employment with the District, the District may conduct a check of my criminal background. I agree to sign a DCI Criminal Background Check Waiver authorizing the District to obtain a check of my criminal history, and I further agree to provide all information necessary to obtain this criminal background check.

Signature of Applicant

Date

I further understand that if I apply for employment with the District, the District may conduct of the Iowa Sexual Offender Registry. I agree to sign a waiver authorizing the District to obtain a check of any history related to this registry, and I further agree to provide all information necessary to help complete this check.

Signature of Applicant

Date

I further understand that if I apply for employment with the District, the District may conduct a check of the Iowa Child Abuse Registry and Adult Abuse Registry. I agree to sign a wavier authorizing the District to obtain a check of this registry, and I further agree to provide all information necessary to obtain help complete this check.

Signature of Applicant

Date

I understand that employment at this District is “at will,” which means that either I or the District can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of the District, other than the superintendent has any authority to alter the foregoing.

Signature of Applicant

Date

I. APPLICATION INFORMATION

1. All application materials should be returned to:
Principal
Paton-Churdan School
606 Adrian Street
Churdan, Iowa 50050
Telephone 515-389-3111

The Paton-Churdan Community School District is an EEO/AA employer and provides equal employment opportunities to all persons. It is the policy of the Paton-Churdan Community School District not to discriminate on the basis of race, creed, color, sex, sexual orientation, gender identity, disability, religion, age, political affiliation, socioeconomic status, or marital status in its programs, activities, or employment practices as required by the Iowa Code sections 216.9 and 256.10(2), Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C. §§ 1681 – 1688) Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.). If you have questions or grievances related to compliance with this policy by the Paton-Churdan Community School District, please contact the Superintendent at Paton-Churdan CSD, 606 Adrian Street, Churdan, Iowa 50050, telephone 515-389-3111, or the Director of the Office for Civil Rights, U.S. Department of Education, 500 W. Madison Street, Suite 1475, Chicago, IL 60661.