

River Valley Community School District
P.O. Box 8 - 916 Hackberry Street - Correctionville, IA 51016-0008
(712) 372-4420 Fax (712) 372-4677

APPLICATION – CLASSIFIED POSITION

Substitute Only____ **Regular Employment Only**____ **Substitute or Regular Employment**____

River Valley Community School District is an Equal Opportunity/Affirmative Action Employer. The District does not discriminate based on age, race, creed, color, sex, national origin, religion, sexual orientation, gender identity, marital status, or disability and will provide reasonable accommodations to qualified individuals with disabilities. In keeping with the law, the board will consider the veteran status of applicants. Title IX Coordinator: Supt. of Schools, Box 8, Correctionville, IA 51016

Application Date: _____ Date Available: _____

Name: _____ Social Security #: _____

U.S. Citizen: ____ Yes ____ No Are you legally eligible to work in the United States? ____ Yes ____ No

Phone: _____ Cell Phone: _____ E-mail: _____

Street Address/P.O. Box: _____

City: _____ State: _____ Zip Code: _____

Position(s) for which you are applying:

_____ Custodial/Maintenance Dept.

_____ Transportation Dept. (Pre-employment Alcohol and/or Drug Testing is Required)

_____ Food Service

_____ Teacher Associate

_____ Secretary

_____ Other (Please specify) _____

Available full time? ____ Yes ____ No

Would you consider less than full time? ____ Yes ____ No

EDUCATION

School/College	Location	Number of Years Completed	Diploma/Degree
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe any experience, skills, or qualifications which you feel would especially qualify you to work for the River Valley Community School District. Include any applicable training/certifications/licenses held.

EMPLOYMENT HISTORY

Please list your work experience, starting with your present or last place of employment.
We reserve the right to contact current and former supervisors in addition to the references listed on this form.

Dates of Employment _____ to _____ Employer _____
Position _____ Supervisor's Name & Phone _____
Salary _____ Reason for Leaving _____
Duties/Responsibilities _____

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PERSONAL REFERENCES

Name _____ Address _____
Phone _____ Relationship _____

Name _____ Address _____
Phone _____ Relationship _____

Name _____ Address _____
Phone _____ Relationship _____

Are you an honorably discharged veteran? ____ Yes ____ No

If yes, give dates of service: _____

Are you on a sex offender registry? ____ Yes ____ No

Are you on the Department of Human Services' child abuse or adult abuse registry? ____ Yes ____ No

In the past ten years, have you been convicted of a felony or misdemeanor (excluding traffic violations)?
____ Yes ____ No If yes, please provide date, incident city/state of charge: _____

Responding "yes" to any of the previous questions will not automatically result in your disqualification from consideration for employment. How recent the offense, the nature of the offense, and its relationship to your fitness for the job will be considered.

Are you able to perform, with or without reasonable accommodation, the essential job functions required of this position? ____ Yes ____ No If no, explain: _____

Authorization and Verification: The information given in this application is true and complete to the best of my knowledge. Should I be employed by the River Valley Community School District, any omission of relevant data, misrepresentation, or false statement contained herein may be considered cause for immediate dismissal.

Should a qualified offer of employment be made to me, I understand that I will be required to pass a medical examination by a physician, related to my ability to perform the essential duties of the position offered. Should I be employed by the River Valley Community School District, I understand I will be required to fulfill all essential functions of the job I am hired to perform, with or without reasonable accommodation. Inability to do so may render me no longer qualified for the position, and may be considered cause for dismissal.

I hereby authorize the River Valley Community School District or its agents to make an investigation of my employment history, criminal/police records and personal history. I authorize former employers, my references, or any other person or entity contacted by the District or its agents investigating the merits of this application to disclose personnel or criminal/police records, information about my qualifications for the position or any other information relating to my application and release them from any liability for such disclosure.

Applicant's Signature

Date

TRANSPORTATION DEPARTMENT APPLICANTS:

CDL License (Commercial Driver's License) ____ Yes ____ No

Type: ____ Passenger ____ Air Brake ____ Class B

Number of traffic violations in the past 5 years ____ Type: ____

Number of accidents in the past 5 years ____

Have you ever tested positive for an alcohol or drug test, refused to be tested? ____ Yes ____ No

If yes, explain: ____

I (print name) ____ authorize my employers to release the results of any drug or alcohol tests, or any information regarding refusals to be tested, to the River Valley Community School District.

Applicant's Signature

Date

AFFIRMATIVE ACTION INFORMATION

Completion of this form is optional. However, we would appreciate it if you would supply the requested information. In order to comply with regulations established by the U.S. Equal Employment Opportunity commission, the Office of Civil Rights in the U.S. Department of Education, Iowa Code 19B.11 and I.A.C. 281-ch.95, the District must report statistical summaries of the information requested. The information is used for this purpose and other affirmative action purposes only.

Section 1

_____ A. American Indian or Alaskan native
_____ B. White, not of Hispanic origin
_____ C. Black, not of Hispanic origin
_____ D. Asian or Pacific Islander
_____ E. Latino or Hispanic
_____ F. Other

Section II

Male _____ Female _____ Age _____
Handicapped: Yes _____ No _____
Disabled Veteran (any era): Yes _____ No _____
Vietnam Era Veteran (1964-1975) Yes _____ No _____

Section III

Please check the source from which you learned of this position.

_____ Advertisement in newspaper, professional journal, newsletter or job registry, including Workforce Center of Iowa.

Please indicate name of the publication. _____

_____ Position announcement at school

_____ Personal contact by District

Name: _____ Date: _____

Position Sought: _____

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