

# Copper River School District P.O. Box 108 / 1976 Aurora Drive Glennallen, AK 99588

Copper River School District

Glennallen • Kenny Lake • Slana • Upstream Learning

# Classified Application and Instructions

### What is a Classified Position?

Classified positions do not require an Alaska teaching or administrative certification as a minimum qualification.

### **Posting Period**

Applications are accepted during the advertisement phase listed on each job posting.

### **Application**

A separate application is required for each job posting. Copies of applications are accepted with a current signature page.

### Selection

An applicant who is selected for a position will be contacted by the District with an official offer of employment. If an applicant cannot be contacted within a reasonable timeframe, another applicant may be selected.

# COPPER RIVER SCHOOL DISTRICT Classified Application

Position Title			
i Osilion Hile			

**P.O. Box 108** 1976 Aurora Drive Glennallen, AK 99588 (907) 822-3234

Last Name		!	First Name				MI		
Previous Name(s) Used									
Present Address			City				State	Zip	
Permanent Address			City				State	Zip	
Home Phone	Work Phone		Cell/Message Phone Leave		Leave M	lessage With			
Former Copper River School  EDUCATION	District Employee? □ No	o □Yes	s Forme	er Posit	tion				
School Name	City/State		Dates Atte From	nded To	Grad Yes	duated No	Major Cours or Subject	e Degree/Cert	Credit Hours
High School									
College/University									
College/University									
Technical/Trade School									
Technical/Trade School									
Technical/Trade School  Business School									
College/University  Technical/Trade School  Business School  Other Education/Training									

 Application Processed By:
 E-Mail:
 Fax:

## **OUTSIDE ACTIVITIES**

Professional memberships, certificate	s, or licenses held:	
Past/present civic activities - include o	ffices held:	
QUALIFICATIONS AND SKI Check all items below that fall within you  Office Skills  _ Accounting _ Accounts Receivable _ Accounts Payable _ Bookkeeping _ Data Entry _ Filing _ Letter Composition _ Purchasing _ Recordkeeping - Financial _ Recordkeeping - Payroll _ Reports - Statistical _ Reports - Financial _ Report Writing _ Other - Explain:		Special Education Aide  Behavior Support Deaf Interpreter Signing Type: Learning Disabled Mentally Disabled Physically Disabled OT/PT Speech/Language Other - Explain:
	Crafts & Trades	Instructional Aide
Office Equipment	<ul> <li>Heating &amp; Ventilation</li> <li>Plumber</li> <li>Electrician Q</li> <li>Electronics</li> <li>Mechanic</li> <li>Carpenter</li> <li>Warehousing</li> <li>Alaska Driver's License</li> <li>License Type:</li> <li>Other -Explain:</li> </ul>	Bilingual Writing Math Music Reading Science Other - Explain:
Fax Photocopiers 10 Key Calculator Telephones Keyboard Other - Explain:	Other  First Aid Card Expires: Food Service Institutional Cleaning/Custodial Safety/Security Other - Explain:	Fluent Languages:

## **EMPLOYMENT RECORD**

Start with present or most recent positions. List all previous employers, including self-employment, summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but completion of this section is also required.

Dates Worked From	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
То				
Last or Present Employe	 r			Description of Duties
Last of Fresent Employe				Description of Duties
Street Address State ZIP			City,	
State ZIP				
Supervisor's Name				
Telephone				
Reason for Leaving				
Treason for Leaving				
			T	
Dates Worked From	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
То				
Previous Employer			l	Description of Duties
Street Address			City,	
State ZIP			Oity,	
Supervisor's Name Telephone				
relepriorie				
Reason for Leaving				
Dates Worked From	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
To	,	Gian in ig i al		0.00 0.000
				D 16 (D6
Previous Employer				Description of Duties
Street Address			City,	
State ZIP				
Supervisor's Name				
Telephone				
December Leaving				
Reason for Leaving				
Dates Worked From To	Hrs/Week	Starting Pay	Ending Pay	Job Classification/Title
Previous Employer	l .			Description of Duties
. ,				
Street Address			City,	
State ZIP			Oity,	
Supervisor's Name Telephone				
i eleptione				
Reason for Leaving				
_				

# REFERENCES

List three references, other than re	latives, who have knowledge	of your work experience	and abilities. At least	one reference
should be a previous supervisor.				

Name	Title	Address		Phone
Name and relationship of r	elatives who work for the Co	opper River School District	or who serve on the CRS	SD Board (if any):
Name	Relationshi	р	Department	
the situation. The District actions described below.	f the following questions yo will consider all the circums Your written explanation wil Yes answers to the followir f necessary.	tances, including the dates I assist the District in deter	and nature of events w mining your eligibility, qu	rhich have led to the ualifications, and
trial for any criminal offens allegation of drug or alcoh vacated, or expunged. If y	nvicted of, pleaded no cont se (including felonies and m ol impairment)? You must a ou answer YES you must p he accusation against you,	isdemeanors and excluding answer YES even if the mater rovide dates of the proceed	g only minor traffic viola tter was later set aside, lings, the court where th	tions not involving an dismissed, deferred,
YesN	0			
even if charges against you later resolved with any for	smissed (fired) from any job ou or an investigation of you om of settlement or severand ation of employment, the na reasons for termination.	r behavior is pending. You ce agreement, regardless o	must answer YES even of its terms. If you answe	if the matter was er YES you must
Yes No	)			
by, or is any charge or corbody, public or private? If	r license or certificate of any nplaint now pending agains you answer YES you must pody where proceedings too	t you before any licensing, provide the dates of the pro	certification, or other rec ceedings, name, addres	gulatory agency or ss, and telephone
YesN	0			
certification, or other regul	g investigated for any allege atory body or by your currer none number of the employe	nt or any previous employe	r? If you answer YES yo	ou must provide the
Yes1	No			
of support services? If you	d abuse or neglect ever bee answer YES you must pro- ation(s) against you, and th	vide dates of the proceedin	gs, the court where the	ion or a requirement proceedings occurred
Yes N	lo			
6. Does your name appea	ar on any Sex Offender data	base in any state or countr	y?	
Yes No				

#### APPLICANT NOTE

It is my understanding that as a part of the Copper River School District procedures for processing my employment application, a background check may be made which allows access to confidential and proprietary information and systems. Information is obtained through third parties, such as business associates, financial sources, present and previous employers, Alaska State Troopers, Federal Bureau of Investigation, and others familiar with my background. This inquiry will include confirmation and information as to my character, general reputation, personal characteristics, previous employers, educational background, current and previous residence locations, and conviction records. I hereby authorize the Copper River School District to obtain from my present and former employers, references, educational institutions, and other persons all data needed to support this application. I also recognize that the school district has the right to access certain criminal information under Alaska Statute 12.62.035 and authorize the school district to make such inquiries as are authorized by that statue. I release Copper River School District and any persons providing information to Copper River School District from all liability pertaining to the release of any information pertaining to my employment application. I certify that all statements made on this application are true and complete to the best of my knowledge and any false statements, misrepresentation, or concealment of material will subject me to disqualification or immediate dismissal from employment.

It is my understanding that employment with Copper River School District requires the recommendation of the Superintendent and must be ratified by the School Board. Upon employment, the applicant must also have a current physical.

I have reviewed the job description and requirements.	uirements of the position for which I am applying	and understand these
Yes No		
• •	on(s) of the position for which you are applying, endation(s) for accommodation. Attach addition	
Yes No		
Are you legally authorized to work in the Ueligibility will be required before you can be	nited States as a citizen or non-citizen with empegin work.	ployment authorization? Proof of
YesNo		
Print Name	Signature	Date
I III ILI VOILIG	ognaure	

# EQUAL OPPORTUNITY EMPLOYER

CERTIFICATION AND RELEASE

It is the policy of the Copper River School District to provide equal education and employment opportunities and to provide services and benefits to all students and employees without regard to race, color, religion, physical or mental disability, national origin, gender, age, or other prohibition. This policy of the Copper River School District is consistent with applicable laws, regulations, and executive orders enforced by various federal, state, and municipal agencies, including, but not limited to, Executive Order 11246, Title 41, part 60-1, 60-2, 60-3, 60-20, Title VI and VII of the 1964 Civil Rights Act, and Title IX of the Education Amendments Act of 1972.

Date Received	