

**APPLICATION FOR EMPLOYMENT****Equal Opportunity:**

Sutherlin School District is an equal opportunity employer and complies with all applicable state and federal statutes and regulations in employment and school district programs.

**Complete in your own handwriting using blue or black ink.**

**Position**

☐ Custodial ☐ Food Service ☐ Instructional Assistant ☐ Maintenance ☐ Transportation ☐ Office

☐ Full-time work ☐ Part-time work ☐ Temporary Summer Help Willing to sub? ☐ Yes ☐ No

☐ Elementary ☐ Intermediate ☐ Middle School ☐ High School ☐ Administrative

I can begin work on  Position applying for

Name (Last, First, Full Middle Name)

Have you ever worked under another name? ☐ Yes ☐ No

If Yes, please indicate.

CURRENT ADDRESS

CITY, STATE, ZIP CODE

TELEPHONE NUMBER

MESSAGE NUMBER

SOCIAL SECURITY NUMBER

Are you legally eligible for employment in the U.S.A.? ☐ Yes ☐ No

Do you have a valid Oregon Drivers License? ☐ Yes ☐ No

If yes, type of license

Have you received a job description or had the essential functions of the job explained to you? ☐ Yes ☐ No

Do you understand these essential functions? ☐ Yes ☐ No

Can you perform the essential functions of this job with or without reasonable accommodation? ☐ Yes ☐ No

Do you possess a first aid card? ☐ Yes ☐ No Card expires  Class date

Are you a member of the Oregon Retirement System? ☐ Yes ☐ No

I verify that all information on this employment application is true and complete. I understand that any misrepresentation, falsification, or omission on this application or on other documents submitted to the school district will be sufficient cause for this application not to be considered by the school district or for discharge if I have been employed. By signing this application, I understand I am authorizing Sutherlin School District to release state form #581-2282-X, reporting status of nationwide criminal history check to school districts in Oregon requesting the information.

Signature

Date

## AUTHORIZATION TO OBTAIN AND RELEASE INFORMATION

I understand and authorize the Sutherlin School District to check my references, to obtain information from my prior employers and references. I authorize my prior employers and listed references to provide such information to the Sutherlin School District. I release the Sutherlin School District and all persons providing information to the Sutherlin School District from any liability whatsoever for obtaining and providing that information regardless of the results.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## EMPLOYMENT HISTORY

**Complete this section even if you will be attaching a resume'.**

Complete employment history for employment during the past 10 years.

Company Name

Address

City

State

Zip Code

Phone Number

Type of Business

Employment Began

Employment End

### JOB INFORMATION

Job Title

NAME OF IMMEDIATE SUPERVISOR

DESCRIBE DUTIES


Company Name

Address

City

State

Zip Code

Phone Number

Type of Business

Employment Began

Employment End

### JOB INFORMATION

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City

State

Zip Code

Phone Number

Type of Business

Employment Began

Employment End

JOB INFORMATION

Job Title

NAME OF IMMEDIATE SUPERVISOR

DESCRIBE DUTIES

VOLUNTEER AND COMMUNITY ACTIVITIES

Organization Name

Location

Dates Involved

VOLUNTEER & COMMUNITY INFORMATION

DESCRIBE PARTICIPATION

Organization Name

Location

Dates Involved

VOLUNTEER & COMMUNITY INFORMATION

DESCRIBE PARTICIPATION

Organization Name

Location

Dates Involved

VOLUNTEER & COMMUNITY INFORMATION

DESCRIBE PARTICIPATION

Organization Name	Location	Dates Involved

### VOLUNTEER & COMMUNITY INFORMATION

DESCRIBE PARTICIPATION


### QUALIFICATIONS

Please list any additional qualifications such as military experience, courses taken, hobbies, interests, or any other activities that you feel qualify you for this position.


### EDUCATION

	Name of School	Location	Degree /Diploma (Yes or No, if yes indicate type)	Hours or Credits
<b>High School</b>				
<b>College / University</b>				
<b>Other Schools</b>				

### REFERENCES

Please list four references OTHER THAN FOR WHOM YOU HAVE WORKED, and who are not family members who have firsthand knowledge of your abilities, character and personality. Complete this section even if you are including a resume'.

Name	Address	Company	Telephone Number

**Drug-free Workplace:**

Sutherlin School District is committed to maintaining drug-free workplaces and complies strictly with all applicable state and federal statutes and regulations in employment and school district programs.

Any offer of employment is contingent upon successful passage of:

- A pre-employment drug screen test; and
- Fingerprinting and a criminal record check in accordance with OAR 581-22-716 and district policy.  
The employee will be responsible for the costs of fingerprinting and criminal records checks.

Sutherlin School District does not discriminate on the basis of race, color, national origin, age or disability in employment or the provision of services.

**TRANSPORTATION APPLICANTS**

Only transportation applicants should complete this page of the application.

Do you have a CDL license? ☐ Yes ☐ No      Expiration date:

Do you have 10 hours of training? ☐ Yes ☐ No      Expiration date:

Have you ever driven a school bus before? ☐ Yes ☐ No

Give dates and places of experience:

DATES (FROM/TO)	PLACE
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Have you had a vehicle accident of any type within the last five years? ☐ Yes ☐ No

Please give date and circumstance of accident:

DATE	CIRCUMSTANCE
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Have you received any citations for any moving violations during the last five years? ☐ Yes ☐ No

If yes, answer below:

DATE	TYPE	NUMBER	DETAILS
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Has your license ever been revoked? ☐ Yes ☐ No If yes, answer below:

DATE	WHERE	WHY

ave you ever been convicted, pled guilty, no contest or forfeited bond or bail for any traffic violations in the past three years? ☐ Yes ☐ No If yes, please give details:

DATE		WHERE	DETAILS

Continued employment as a bus driver is contingent upon the applicant receiving the School Bus Driver's permit from the State Department of Education and maintaining an acceptable driving record as verified by the Oregon Motor Vehicles Division.

Oregon Department of Education  
Public Service Building  
255 Capitol Street NE  
Salem, Oregon 97310

Office of Finance and Administration  
Pupil Transportation and Fingerprinting  
503 -947-5600  
FAX 503-378-5156

### CRIMINAL HISTORY VERIFICATION OF APPLICANTS

**Please type or print clearly.**

As Appears on License

Name:    Date of Birth:  Sex:   
(Last Name) (First Name) (Middle Name) MM/DD/YY

List Other Names Previously Used:(includes Maiden Name)

Social Security No.:  Driver License/Identification Card No.:   
*Providing your social security number on this form is voluntary. If you choose not to disclose the social security number, this will not be a basis for denial of employment or any rights, services or benefits to which you are otherwise entitled. If you do provide the number the Oregon State Police will use it as an additional identifier to search for any criminal record you may have. Your social security number will be used as stated above. State and federal laws protect the privacy of your records.*

Mailing Address:   
Full Street Address/Post Office Box

City:  State:  Zip + :

A. Have you **EVER** been convicted of a sex-related crime? ☐ Yes ☐ No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State:

If yes, did the crime involve force or minors? ☐ Yes ☐ No

B. Have you **EVER** been convicted of a crime involving violence or threat of violence? ☐ Yes ☐ No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State:

C. Have you **EVER** been convicted of a crime involving criminal activity in drugs or alcoholic beverages. ☐ Yes ☐ No

If yes, was the conviction in Oregon or another state? (Please specify if another state.) State:

D. Have you **EVER** been convicted of any other crime except a minor traffic violation? (Includes Traffic Crimes) ☐ Yes ☐ No

E. Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal? ☐ Yes ☐ No

**Advisory:** A check of the applicant's criminal history will be made by the Oregon Department of Education to verify the responses to the preceding questions.

I hereby grant to the Oregon Department of Education permission to check civil or criminal records to verify any statement made on this form. Regardless of whether the applicant grants consent, the Oregon Department of Education will conduct a criminal offender record check of applicants for the position of school bus driver, volunteer, or other prospective school employees working with or around children. The applicant is entitled to review his/her criminal history for inaccurate or incomplete information. Discrimination by an employer on the basis of arrest records alone may violate federal civil rights law. The applicant may obtain further information concerning the applicant's rights by contacting the Bureau of Labor and Industries, Civil Rights Division, State Office Building, Suite 1070, Portland, Oregon 97232, telephone (503) 731-4075.

I acknowledge reading and the receipt of this notice.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_



### **VOLUNTARY EEO INFORMATION**

This information is voluntary and is collected only for Equal Employment Opportunity reporting purposes. This form will be physically separated from your other applications materials and will not affect the application process in any manner. Should you prefer not to provide this information, there will be no effect on your application.

Sex                      Male    Female  
                             ☐      ☐                      Date of Birth

Race or Cultural Group

Are you a Military Veteran?