

Imbler School District #11

P.O. Box 164 • Imbler, Oregon 97841 | 541.534.5331 • Fax: 541.534.9560

EMPLOYMENT APPLICATION

Imbler School District complies with all state and federal rules and regulations and does not unlawfully discriminate on the basis of race, color, creed, religion, national origin, age, sex/gender, marital status, or the presence of any sensory, mental or physical disability.

Please fill out only that portion of this form that you feel pertinent to the position for which you are applying.

Full Name _____
Last First Middle

Mailing Address _____
Street City State Zip

Date of Availability _____ Previous or other surname(s) reflected on employment or educational records _____

Phone (____) _____ Msg. Phone (____) _____ Date of birth _____

Position applying for _____

Are you a U.S. citizen or otherwise legally authorized to work in the U.S.? Yes No

Is your physical/mental health condition such that you can fulfill the essential job functions of the teaching/extracurricular work for which you are applying (either with or without reasonable accommodations)? Yes No

Currently under contract with another school district? Yes No

If yes: School District _____ City _____

Current Oregon Teaching License

Type(s) (e.g. Basic D-474, Temporary, etc.) _____

Endorsement(s) (e.g. Physical Education) _____

Authorization(s) (e.g. 018) _____

Date of Expiration _____

Added endorsements expected _____

If no Oregon License, when is it expected? _____

Month Year
 Full-Time Contract Part-Time Contract
 Temporary Contract Substituting Other _____

Personal History

Have you ever:

YES NO

- been dismissed from a teaching position?
- been asked to resign from a teaching position?
- been refused continuing employment as a teacher?
- had a teaching license revoked?
- been convicted, pled guilty, or pled no contest to a felony?
- been convicted, pled guilty, or pled no contest to a crime involving child abuse or sexual abuse?
- had a report of child abuse or sexual activities involving a K-12 student or minor filed against you with a school district, Children Services Division, a police agency, or in court?

If yes, please explain _____

EDUCATIONAL BACKGROUND

High School, Colleges, Universities Name, City, State	Dates Attended Mo/Yr to Mo/Yr	Type of Degree Earned	Major & Minor (if any)
<i>High School</i>			
<i>Graduated?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>College/University</i>			
<i>If not a High School Graduate, do you have a certificate of equivalency (GED)?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, Date:</i>			

WORK EXPERIENCE

Beginning with your present or most recent job, describe your work experience during the past TEN years. In addition, list any other prior experience related to the duties of the position for which you are applying. Also include all non-paid or volunteer work.

Employer	Position	Supervisor	
Address		Dates of Employment	
Specific Duties			
<i>If you are still employed here may we contact this employer?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
Employer	Position	Supervisor	
Address		Dates of Employment	
Specific Duties			
Employer	Position	Supervisor	
Address		Dates of Employment	
Specific Duties			
Employer	Position	Supervisor	
Address		Dates of Employment	
Specific Duties			

REFERENCES

Give references (a minimum of three) who have first-hand knowledge of your character, experience or ability.

Name	Address	Business	Phone
Name	Address	Business	Phone
Name	Address	Business	Phone

TEACHING EXPERIENCE

Include only those positions for which a teaching license was required (list most recent first). Approval of experience shall be determined at the time of employment. You will be asked to provide official verification.

District Name Address (Street, City, State)	Name of School	Grade Taught	Subject(s) Taught	Full-Time or Part-Time	Dates of Employment	Total Years	Reason for Leaving

STUDENT TEACHING EXPERIENCE

Please list experiences in a recognized teacher preparation program only.

District Name & School Address (Street, City, State)	Grade(s) Taught	Subject(s) Taught	Dates Taught	Supervising Teacher

REFERENCES

Give references (a minimum of three), especially superintendents or principals under whom you have taught, who have first-hand knowledge of your character, personality, and teaching ability.

Name	Address	Position	Phone
Name	Address	Position	Phone
Name	Address	Position	Phone

AUTHORIZATION TO OBTAIN AND RELEASE INFORMATION

I authorize Imbler School District #11 for which I have completed an employment application to check my references, to obtain information from my prior employers and educational institutions, and to take other actions to investigate any information provided in my employment application, and to obtain information relevant to evaluating my qualifications and fitness for employment. I authorize my listed references, past employers and educational institutions, and anyone else who has information about my work history, education qualification or fitness, to provide such information. I release the school district and all persons providing information to the school district from any liability whatsoever for obtaining and providing that information, regardless of the results.

Signature of Applicant _____ Date _____

Use this space for additional details or clarification: