

Applicant Name _____



Roxboro Community School

"We place children first."™

115 Lake Drive, Roxboro, NC 27573

(336) 597-0020

Fax: (336) 419-4551

www.roxborocs.org

Dear Applicant:

I am pleased to learn of your interest in serving as a substitute for Roxboro Community School. We are seeking exceptional candidates that demonstrate a commitment to the RCS school mission.

The mission of Roxboro Community School is to achieve and maintain educational excellence by providing a small, inviting and nurturing school that focuses on grades six through twelve. RCS values and respects each member of our school family, thus enabling everyone to become effective, productive citizens. RCS will provide an environment that will direct our students to focus on relevant and rigorous learning that will continue after high school. It is the vision of our school to create educated, responsible and productive men and women who are equipped to face the challenges of the 21st Century.

TO SUBMIT A SUBSTITUTE APPLICATION:

1. Download the Roxboro Community School Substitute application from this website or contact the Main office at (336) 597-0020.
2. Complete the application in its entirety.
3. Submit authorization for background check.
4. Return all documents to the front desk or email them to bryantds@roxborocs.org.

Thank you for your interest in Roxboro Community School.

Sincerely,

Managing Executive Director

SUBSTITUTE TEACHER APPLICATION

Last Name	First Name	MI
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Address	City	State	Zip Code
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Telephone Number	Social Security Number
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Circle the days of the week you are available:

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

Circle the areas in which you would like to substitute:

MIDDLE SCHOOL HIGH SCHOOL DINING HALL CUSTODIAN OFFICE

Education

Name of School	Year of Graduation	Degree Earned
High School		
College: Undergraduate		
College: Graduate		

Employment History

Company Name	Supervisor Name and Position	Telephone Number
Current or Most Recent Employer		
Your Job Title and Description		
Second Previous Employer		
Your Job Title and Description		
Third Previous Employer		
Your Job Title and Description		

References

Name	Business and Position	Telephone Number
1)		
2)		
3)		

Other Information: You must give complete answers to all questions.

	Yes	No
Have you ever been convicted of a criminal offense?		
Are you currently under charges for a criminal offense?		
Have you ever been dismissed from a position or asked to resign?		
Have you ever resigned rather than face disciplinary action or nonrenewal?		
Are you legally able to work in the United States of America		

Note: If you answered "Yes" to any of the above questions, please provide a detailed explanation on a separate sheet of paper, including dates and attach it to this application. Please print and sign your name on the sheet.

Criminal Offenses includes felonies, misdemeanors and convictions resulting from a plea of "no contest".

Conviction is an adjudication of guilt and includes determinations before a court, a district justice or a magistrate, which results in a fine, sentence or probation.

You may omit: minor traffic violations, offenses committed before your 18th birthday, which were adjudicated in juvenile court or under a youth offender law and any convictions, which have been expunged by a court.

All offers of employment are conditioned upon the results of a criminal history check and a check of state and national sex offender registries.

CERTIFICATION AND RELEASE AUTHORIZATION

I certify that all of the statements made by me are true, complete and correct to the best of my knowledge and belief, and are made in good faith. I understand that any misrepresentation of information shall be sufficient cause for rejecting my candidacy, withdrawing of any offer of employment, or terminating my employment.

I hereby authorize all of my previous employers and supervisors to release any and all of my personnel records and to respond fully and completely to all questions that officials of Roxboro Community School may ask regarding my prior work history and performance.

Date

Signature of Candidate



ROXBORO COMMUNITY SCHOOL

PRE-EMPLOYMENT DISCLOSURE AUTHORIZATION AND RELEASE

I understand that Roxboro Community School ("RCS"), or authorized third parties, may be conducting a background check in connection with my application for employment or placement with RCS. This background check may include an inquiry into my employment history, education, general character or reputation, work experience, driving history (MVR), criminal history, credit history and such other information that may be required.

I understand that RCS may rely on all or any part of this information in determining whether to extend an offer of employment or placement. I further understand that if any adverse action is taken by RCS based upon any of this information, that I will be provided a copy of such information along with a summary of my rights under the Fair Credit Reporting Act.

I understand that a background check may be performed by RCS or its representatives as a part of the screening process in order to evaluate the suitability of an applicant for employment or placement and is not conducted for any other purpose other than in connection with an application for employment or placement with RCS. I understand that the information supplied by me to RCS shall be used solely for the purposes of obtaining information, validating or verifying information received, as a part of the background check.

I, the undersigned applicant, have read this Pre-employment Disclosure and by signing below, hereby authorize RCS, its representatives, agents and authorized third parties, including SOI Online, to conduct a background check, as described herein, in conjunction with my application for employment or placement and hereby release said parties from any and all liabilities related to the use, procurement or disclosure of any information provided by me or obtained about me in connection with my application for employment or placement and a background check that may be performed. I further direct and authorize such third parties who may be the custodians of or who may be in possession of requested records or information to disclose such information or records to RCS, SOI Online or their representatives and agents, in connection with this authorization and release. I voluntarily provide my date of birth and SSN in order to obtain records, and to verify records obtained, in connection with the background check.

Signature _____ Date _____

Printed Name _____

***** THE INFORMATION SUPPLIED BELOW SHALL ONLY BE USED TO REQUEST AND VERIFY RECORDS *****

Current Address: _____

Check [] if you have lived in any other State within the past 7 years.

Other States: _____

Maiden/Prior Names: _____

Social Security Number: _____ DOB: _____

Driver License #: _____ State: _____ Exp. Date: _____