

## LANESVILLE COMMUNITY SCHOOL CORPORATION 2725 CRESTVIEW AVE LANESVILLE, IN 47136



## "An Equal Opportunity Employer" Certified Application

	Applicant should rea	ad application carefully. T OTE: BEFORE EMPLOYN		nt		
Date of Application					Date available to begin	
Last Name		First Name Midd			dle Name	
Address			State		Zip Code	
City			Phone Nu	mber		
Email Address		Date of Birth		Social S	Security Number	
Were you previously employed in this school system?   NO YES If YES, give date						
LICENSE						
(1) a copy of currently v that you are eligible for	one of the following, as a alid Indiana certification, certification (3) a stateme at you will be recommend	(2) a statement from In nt from the certification	diana De n advisoı	partmei	nt of Public Instruction	
Do you have a valid India	na Certificate?   NO	☐ YES If <b>YE</b>	<b>S</b> , please	comple	te the following:	
Kind of License(s):	Kind of License(s):   Elementary   Middle/Junior High   Secondary   Other/Specify					
Grade of License:						
Subjects or Grades Cove	red:					
License Serial Number		Date of Issue		Date o	f Expiration	
If you do not have an Indi  Do you have a valid out-o  Kind of License(s):  Grade of License:  State of Issuance:  Subjects or Grades Cove	Elementary Middle/J	☐ YES If <b>YES</b> , plea	ry 🗆 C	□ Notete the fo	ollowing:	
License Serial Number	Date of Issu	10	Date	of Expira	tion	
2.001100 OUT at I tallingo.	Date of issu		Date	OI EXPIIA	tion	

Candidates who have attended out-of-state teacher training institutions and do not hold a valid Indiana Certificate should contact: TEACHER CERTIFICATION, DEPARTMENT OF EDUCATION, ROOM 229 STATE HOUSE, INDIANAPOLIS, IN 46204 - 2798

**TRAINING/EDUCATION -** List all schools and training you have completed that you believe will help quality you for the position you desire:

NAME OF INSTITUTION	DATES ATTENDED	TOTAL YEARS	YEAR OF GRADUATION	DEGREE

**REFERENCES** – List individuals who can speak with authority of your preparation and experience that you believe will help qualify you for the position you desire:

NAME	MAILING ADDRESS	OCCUPATION	PHONE

**EXPERIENCE** – List in chronological order all the positions you have served in similar to the position(s) you desire:

Employing Corporation or School	Dates	Number of Months	Years of Experience	Grades or Subjects

## **CRIMINAL & EMPLOYMENT HISTORY INFORMATION**

In order to be considered for employment in Lanesville Community Schools, you must fully complete the following questionnaire and sign it.

1.	Are you presently being investigated or under a procedure to consider discharge for misconduct by your presenployer? es No	nt
2.	Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position?	

3.	Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation or your sexual contact with another person, of mishandling funds, or of criminal conduct resulting in a conviction or criminal penalty?  Yes No
4.	Have you ever been charged with or investigated for physical or sexual abuse of another person or any other crime of moral turpitude?  Yes No  (moral turpitude is an act of baseness, vileness or depravity in the private and social duties which a person owes another member of society or society in general and which is contrary to the accepted rule of right and duty between persons
	including but not limited to, indecency with a minor, theft, attempted theft, murder, rape and swindling.)
5.	Have you ever been convicted of a misdemeanor and /or felony, entered a plea of guilty or of "no contest", or has any court ever deferred further proceedings without entering a finding of guilty or placed you on probation for a crime other than a minor traffic offense?  Yes No
	If you answered yes to any questions please explain, in detail, including the date of the charge/investigation, the court action, the offense in question, and the address of the court involved if applicable: (attach additional pages if necessary)
	Conviction of a crime is not an automatic bar to employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.
	Any false or misleading information on this application shall be fully sufficient grounds to refuse to employ or, having been employed, shall be immediate cause for dismissal.
	My signature below constitutes authorization to check my employment history, including without limitation, evaluations, criminal arrest and conviction record checks, reference checks, and release of investigatory information possessed by a private or public employer or any state, local or federal agency. I further authorize those persons, agencies or entities that the Lanesville Community School Corporation contacts in connection with my employment application to fully provide the Lanesville Community School Corporation any information on the matters set forth above. I expressly waive in connection with any request for or provision of such information, any claims, including without limitation, defamation, emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the Lanesville Community School Corporation, its agents and officials or against any provider of such information.
KNO\ TRAI	RTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY WLEDGE AND BELIEF. I GIVE PERMISSION TO THIS EMPLOYER TO SEEK INFORMATION ABOUT MY EXPERIENCE, NING, AND QUALIFICATIONS FOR THE WORK I DESIRE AND GIVE PERMISSION TO EACH REFERENCE LISTED TO VIDE SUCH INFORMATION.
SIGI	NATURE OF APPLICANT:
	THIS APPLICATION IS MADE SUBJECT TO INDIANA STATE TEACHERS' RETIREMENT FUND LAW.
It is th	ne policy of the Lanesville Community School Corporation not to discriminate on the basis of sex in its educational programs,

activities, or employment policies as required by Title IX of the 1972 Education Amendments. Inquiries regarding compliance with Title IX may be directed to Superintendent's Office, 2725 Crestview Ave NE, Lanesville, IN 47136, or to the Director of the Office for Civil Rights, Department of Health, Education and Welfare, Washington, D.C.

MAIL THIS COMPLETED APPLICATION WITH **ORIGINAL SIGNATURES** TO:
Lanesville Community School Corporation, Superintendent,
2725 Crestview Ave NE, Lanesville, IN 47136
Or
complete and upload to online posting.