

CERTIFIED EMPLOYEE APPLICATION

Rock Creek Community Academy
11515 Hwy 31
Sellersburg, IN 47172
812-246-9271

Rock Creek Community Academy does not discriminate in hiring or employment on the basis of age, race, color, gender, handicap, religion or national origin. No question on this form is intended to secure information to be used for such discrimination. An official transcript and license must also be on file to be an active applicant.

Background Information

Name _____
Last First Middle

Home Address _____
Street City State

Home Phone _____ Cell Phone _____

Position Applying For

Teaching Certificate Information:

Subject/Grade Level on License: _____ Serial # _____

State: _____ Expiration Date: _____

1) Teaching Preference, 2) Grade Level , 3) Subject:

1) _____ 2) _____ 3) _____

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References: Please list the names of four persons who know your professional background and qualifications. These may include university professors, members of the community, administrators under whom you have worked, or colleagues.
No relatives, please.

Name and Position	Address	Office Phone	Home Phone
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Name and Position	Address	Office Phone	Home Phone
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Name and Position	Address	Office Phone	Home Phone
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Name and Position	Address	Office Phone	Home Phone
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Educational Background:

High School:

	Dates Attended	Graduation Year
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Undergraduate:

Institution	Dates Attended	Major/Minor	Degree & Date
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Graduate:

Institution	Dates Attended	Major/Minor	Degree & Date
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Professional Experience:

Employment Record:

Position	School Corporation	Dates Employed
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Other Employment:

Position	Organization	Dates Employed
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Community Involvement:

List community organizations in which you have been involved and leadership positions you held in these organizations:

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Please write in your own handwriting, a one or two paragraph statement listing any unique qualifications which may distinguish you from other candidates.

Signature of Applicant

Date

Should this application be treated as confidential with regard to your present employer?

_____ **YES** _____ **NO**

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Request for Background Information

Jobs with Rock Creek Community Academy involve contact with our student population. We ask that you complete the questions below to help us to evaluate your suitability to work with these students. All applicants for employment are expected to provide us with this information. The misrepresentation or omission of facts may be grounds for disqualification from further consideration or for termination from employment regardless of when the misrepresentation or omission is discovered.

The conviction of a crime or any affirmative answer provided by you is not an automatic bar to employment. The school will consider the nature of any conviction or alleged conduct underlying the affirmative response, the date of the alleged conduct in question, your interviewing conduct and the relationship between the offense or alleged conduct underlying the affirmative response and the position for which you are applying .

- 1) If you are now working, is your conduct as an employee or the quality of your work the focus of any investigation by your current employer? Yes ____ No ____, if yes, explain the circumstances on the reverse side of this sheet.
- 2) Have you ever resigned from a job after being disciplined by your employer or after being offered the opportunity to resign rather than be terminated? Yes ____ No ____, if yes, explain the circumstances on the reverse side of this sheet.
- 3) Have you ever been investigated for, charged with, or pleaded guilty or “no contest” to any crime involving the sexual abuse of any person or indecency with a minor? Yes ____ No ____, if yes, explain the circumstances on the reverse side of this sheet.
- 4) Have you ever been convicted of a crime other than a minor traffic offense or has any court ever deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program for any such crime? Yes ____ No ____

I authorize Rock Creek to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including a criminal history, **for the fee of \$45.00**. I authorize these private or public employees of local, state, or federal agencies to provide the school any information they may release concerning the matter described herein, and I will cooperate to the extent necessary to obtain the release of this information.

I waive in connection with any request for, or provision of such information, any claims or causes of action, including without infraction, defamation, infliction of emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school, its officials, employees, trustees, or agents, or against any provider of such information

I have read this authorization and release of all claims, and I expressly agree to the terms set out herein.

Signature _____ Date _____

Please print your name _____

Social Security Number ____ / ____ / ____

Please print your complete address _____

Birth Date (only for purposes of requesting Criminal History information) _____