PRAIRIE HEIGHTS COMMUNITY SCHOOL CORPORATION

0305 S 1150 E LaGrange, IN 46761 Telephone: 260-351-3214 Fax: 260-351-3614



ADMINISTRATIVE APPLICATION

Personal Data: Name:		Date:		
Address:				
Home Telephone: ()	Work Tele	k Telephone: ()		

CERTIFICATION:				
Type(s) of Certificates Held:		Expiration Date:		
TRAINING: (Copy of transcript Colleges/Universities:	s required) Pates Attended:	Degree:		
PROFESSIONAL EXPERIENCE: School Name:	Address:	Dates:		
Total Number of Years of Regular	eaching/Administrative E	Experience		
MILITARY SERVICE: If any, give branch of service, date experience (Peace Corps, VISTA, T		, and/or alternative service Number of Months		

1	nere, you wish us to obtain pertinent ces listed by you above. If you agree to
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REFERENCES: (No relatives) Please list names, addresses and phone numbers of at lea your character, effectiveness, and professional ability as the administrator.	
PARENT/COMMUNITY INVOLVEMENT: Describe ways in which you have worked with parents and	l/or community members.
List activities (e.g., in-service, seminars, workshops) durin have participated.	

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INSERT TO EMPLOYMENT APPLICATION

Request for Background Information:

Dear Applicant,

Jobs with the Prairie Heights Community School Corporation involve contact with our student population. We ask that you complete the questions below to help us evaluate your suitability to work with these students. All applicants for employment are expected to provide us with this information; you are not being singled out for closer inspection. This insert is part of the application itself and any 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 on this insert is not an automatic bar to employment. The school district 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? If yes, explain the circumstances on the reverse side of this sheet.
4.	Have you ever been charged with a crime listed in number 3 (above) where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program? Yes No If yes, explain the circumstances on the reverse side of this sheet.
5.	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
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AUTHORIZATION AND RELEASE

I authorize the school district to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including a "limited criminal history," possessed by any private or public employer or any local, state, or federal agency. I authorize these private or public employees or local, state, or federal agencies to provide the school district 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 expressly waive in connection with any request for, or provision of such information, any claims or causes of action, including without limitation, defamation, infliction of emotional distress, invasion of privacy, or interference with contractual relations that I might otherwise have against the school district, its officials, employees, trustees, or agents any provider of such information.

I have read this authorization and	release of all claims	s, and I expressly a	gree to th	ne terms set out l	nerein.

Signature:		Date:		
Social Security Number:	Date of birth:	(Used for request of Criminal History Information)		