

**ONTONAGON AREA SCHOOL DISTRICT
701 PARKER AVENUE
ONTONAGON MI 49953
(906) 813-0614**

EMPLOYMENT/VOLUNTEER APPLICATION DATE _____

POSITION APPLYING FOR _____ FULL TIME / SUBSTITUTE

NAME _____
LAST FIRST MIDDLE

PRESENT ADDRESS _____

LENGTH OF TIME AT THIS ADDRESS _____ TELEPHONE _____

PREVIOUS ADDRESS _____

SOCIAL SECURITY NUMBER _____ VETERAN _____ YES _____ NO

EMAIL _____

EDUCATION

TYPE OF SCHOOL NAME AND LOCATION DATES ATTENDED GRADUATE

HIGH SCHOOL _____

COLLEGE _____

POST GRADUATE _____

TECHNICAL/BUSINESS _____

APPRENTICESHIP _____

GRADE POINT AVERAGE IN HIGH SCHOOL _____ IN COLLEGE _____

COLLEGE MAJOR _____ MINORS _____

LIST ACTIVITIES PARTICIPATED IN (INCLUDE ATHLETICS) _____

PREVIOUS EMPLOYMENT
(Please include resume or fill out the following information)

EMPLOYER _____ DATES EMPLOYED FROM _____ TO _____

STREET _____ PAY RATE START _____ FINAL _____

CITY STATE ZIP _____

JOB TITLE _____ PHONE NUMBER _____

SUPERVISOR _____ REASON FOR LEAVING _____

WORK PERFORMED _____

EMPLOYER _____ DATES EMPLOYED FROM _____ TO _____

STREET _____ PAY RATE START _____ FINAL _____

CITY STATE ZIP _____

JOB TITLE _____ PHONE NUMBER _____

SUPERVISOR _____ REASON FOR LEAVING _____

WORK PERFORMED _____

EMPLOYER _____ DATES EMPLOYED FROM _____ TO _____

STREET _____ PAY RATE START _____ FINAL _____

CITY STATE ZIP _____

JOB TITLE _____ PHONE NUMBER _____

SUPERVISOR _____ REASON FOR LEAVING _____

WORK PERFORMED _____

REFERENCES

Give the names, addresses, telephone numbers, and occupations of at least three persons who have known you during the last five years, but are not relatives or previous employers.

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____

Why are you interested in a job with the Ontonagon Area School District?

Please list any special activity, awards or other information that may help us to understand your skills and abilities that will be helpful on this job:

Have you ever been convicted of a felony? _____ Yes _____ No

If applying for a bus driver's job please list any conviction for driving violations of the past five years.

TEACHING APPLICATIONS ONLY

1. Certification: Subject Area _____
Grade Level _____ Expiration Date _____

Is this a Michigan Certificate _____ Yes _____ No

If not, please name state _____

2. Name subjects or grades you are prepared and willing to teach in the order of your preference:

3. Are you able to teach elementary vocal music? _____ Yes _____ No

4. Are you able to teach elementary art? _____ Yes _____ No

5. Are you able to teach elementary physical education? _____ Yes _____ No

6. Can you supervise or assist in coaching school sports? _____ Yes _____ No

If yes, which ones? _____

7. What other extra-curricular activities can you direct? _____

8. How many semester hours have you completed in the teaching of reading? _____

9. Are you under contract for next year? _____ Yes _____ No

10. Professional references

For teachers with experience, please list supervisors, principals, and superintendents familiar with your classroom work. If you have no teaching experience, please list college instructors with whom you have taken courses.

NAME

ADDRESS

OCCUPATION

IMPORTANT - this application will be considered only after your credentials from your placement service are received by us.

Please be certain all applicable sections have been completed. Read the following and sign. Also, sign the "request for release of information and waiver of rights of confidentiality" which may be provided to former employers, present employers, and references provided by you.

In compliance with Title VI of Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disability Act of 1990, and the Elliot-Larsen Civil Rights Act of 1977, it is the policy of the Ontonagon Area School District that no person shall, on the basis of race, color, religion, national origin or ancestry, gender, age, disability, height, weight or marital status be excluded from participation in, be denied benefits of, or subjected to, discrimination during any program, activity, service or employment. For information contact James Bobula (Superintendent/Principal/Civil Rights Coordinator) at (906) 813-0614 or the Ontonagon Area Junior/Senior High School, 701 Parker Avenue, Ontonagon, MI 49953.

I understand that the Ontonagon Area School District may investigate any statement made on this application. Any false statement may prevent employment, or may be cause for dismissal if employed.

I understand that the Ontonagon Area School District has standard physical requirements which all applicants must meet as a condition of employment. I hereby agree to submit to a physical examination by a qualified doctor chosen by the Board of Education, to be given at no cost to me, for the purpose of determining fitness for employment.

Signature Date

REQUEST FOR RELEASE OF INFORMATION & WAIVER OF RIGHTS TO CONFIDENTIALITY

I hereby specifically authorize and request any former employer or present employer, whether specifically listed by me or not, or any person named by me as a reference, to furnish to the Ontonagon Area School District a full and complete report and evaluation of my former service, present service, character reputation, and any other pertinent data requested by the Ontonagon Area School District and authorized by law.

By executing this document, I waive any and all right I may have to confidentiality of any prior employment records, and authorize any person or agency contacted by the Ontonagon Area School District to accept a photocopy of this form equally as an original, and to provide any information said District is authorized by law to obtain.

Signature Date

ONTONAGON AREA SCHOOL DISTRICT

701 Parker Ave.

Ontonagon MI 49953

Phone (906) 813-0614 FAX (906) 813-0615

James Bobula, Superintendent/K-12 Principal

I, _____ (name of applicant), the undersigned applicant for employment with the Ontonagon Area School District, authorize my current and former employer(s) to disclose to the Ontonagon Area School District any unprofessional conduct by me and to make available to the Ontonagon Area School District copies of all documents which relate to that unprofessional conduct in my personnel records maintained by my current or former employer(s).

I understand that this authorization and release applies to any act of "unprofessional conduct" as that term is defined in Section 1230b of the Revised School Code, meaning one or more acts of misconduct; one or more acts of immorality, moral turpitude, or inappropriate behavior involving a minor, or commission of a crime involving a minor.

In addition, I release my current and former employer(s) and their employees acting on their behalf from all liability for providing the information described in this authorization to the Ontonagon Area School District.

In addition, I authorize the Ontonagon Area School District to release any and all information/documents received from my current or former employers to any school district within the boundaries of the Gogebic-Ontonagon Intermediate School District and or the Copper Country Intermediate School District and further release the Ontonagon Area School District and its employees acting on its behalf from all liability for providing the information/documents to any or all school districts within the above named Intermediate School Districts.

Finally, I waive the right to receive written notice (specified by Section 6 of the Bullard-Plawecki Employee Right to Know Act) from my current and former employer(s) for the disclosure of the information described in this authorization to the Ontonagon Area School District.

NAME _____

SIGNATURE _____ DATE _____