Wood River – Hartford Elementary School District 15

CERTIFIED STAFF APPLICATION



"Serving Children with Excellence"

501 E. Lorena Avenue Wood River, Illinois 62095 (618) 254-0607

This School District is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, national origin, ancestor, age, marital status, physical or mental handicap or disability, military status, or unfavorable discharge from military service in the admission, or access to, or treatment or employment in its program and activities. This employer hires only individuals authorized to work under the Immigration Reform and Control Act of 1986. If you require any assistance or accommodation in the application or interview process, please contact the Superintendent's Office at (618) 254-0607.

Name			Date		
Day Phone					
Present Address			Night Phone	Night Phone	
City S		_ State	Zip Code		
Permanent Address _		Phone			
City		_ State	Zip Code		
Social Security Number	er				
POSITION APPLIED F	OR:				
Teacher: Elementary (PreK-5) J	unior High (6-8) §	Special Ed	_
If applying for an eleme	entary position, list grad	e preference.	1 st choice	2 nd choice	
If applying for a junior h	nigh position, list subject	t areas.			
What extra-curricular a	ctivity could you coach o	or sponsor?			
Type of Certificate(s) he	State _		No		
		State _		No	
Administrative:	Elementary	Jι	unior High	Either	_
Other:	Social Worker		Speech Therapist		
	0	Other			
•	onvicted of or plead guilt If yes, please explain	•	al offenses othe	r than minor traffic offe	enses?

Со	College Education:								
	Institution	Location	Major/Minor	Degree	Date Conferred				
2									
		egin with most recent.			Ibstitute teaching)				
160				. teaching or st					
1.	School	Address	Dates		Grade/Subject				
2.									
3.									
Oth	ner Work Experience:	(Begin with most recen	ıt.)						
1	Organization	Location	Dates	Duties	Reason for Leaving				
1. 2.									
3.									
				show your fitne	ess for the position you seek. Please				
incl	ude superintendents a	nd principals with whon	n you have worked.)						
	Name	Address	Phone #		Occupation				
1. 2.									
3.									
			Please read and sign						
l he	arehy certify that the informat	tion herein is to the hest of r		e and complete	Any misrepresentations or willful omission of				
					stand that, pursuant to Section 22-6.5 of <i>The</i>				
	-			-	ry which is material to my qualification for				
					e a class A misdemeanor. Furthermore, it is				
und	lerstood that this application	and records become the pro	perty of the District which re	serves the right to	accept or reject it. I further agree to observe				
all r	rules, regulations, and policie	s of the District. I also under	stand that before any contra	ct for teaching be	comes effective or compensation is possible,				
a va	alid Illinois Teaching Certifica	ate for the teaching assignment	ent must be filed in the offic	e of the Superinte	endent of the Regional Office of Education of				
Mad	dison County.								
l he	ereby authorize Wood River-	Hartford School District #15	to forward my name to the	Illinois Departmen	nt of State Police and FBI for the purpose of				
con	nducting a criminal backgrou	nd check as required by the	Illinois School Code, Sect	<i>ion 10</i> -21.9, and a	agree to execute any forms required by said				
department for such purpose. I understand that the Wood River-Hartford School District#15 may further conduct a check for any indicated reports of									
chil	d abuse under the Abused	and Neglected Child Report	ing Act, 325 ILCS 5/1 et se	eq. Furthermore, I	hereby indemnify, save, and hold harmless				
Wood River-Hartford School District #15 and its officers, agents and employees from any claim of liability or damage which may arise from background									
	checks. I understand that an offer of employment, or continued employment if hired, is contingent upon my passing the Illinois State Police, FBI and								
Chi	ld Abuse Registry backgrour	nd checks.							
I h	ereby authorize Wood Rive	er-Hartford School District	#15 to conduct work histo	ry and reference	checks to determine my acceptability for				
em	ployment. Pursuant to the III	linois Personnel Record Rev	riew Act, 820ILCS 40/.01 et	seq., I hereby wa	aive written notice from my current employer				
			-		ctions taken against me within the past four				
•	•			, ,	om disclosure of personnel records and from				
				•	anners of actions that I may now have or may				
	have in the future concerning such disclosures, regardless of their nature. I further understand that if I accept a contract to teach in the Woo River-Hartford School District #15, the factual statements contained in this application and in the references received pursuant to this authorization are								
	pecome a part of my perman		mainou in tino application a		oo rooorvou paradant to tilis adtiionzation are				
					_				
Sig	nature of Applicant_		· · · · · · · · · · · · · · · · · · ·		Date				