

# ALPENA-MONTMORENCY-ALCONA EDUCATIONAL SERVICE DISTRICT

## APPLICATION FOR EMPLOYMENT

This form must be filled out completely. Failure to do so may result in rejection. All information will be treated as confidential.

Application will be maintained on file for one (1) year	јгот аррисаноп аате.
Date:	
<u>GENERAL</u>	
1. Name of applicant:	
2. Address:	
3. Telephone:	
4. Are you a United States citizen?	
5. How long have you resided at your current address?	
6. Social Security Number:	
7. Position desired:	
Full-Time	Part-Time
8. When would you be available to commence work? _	
<u>EDUCATION</u>	
LIST MOST RECENT FIRST:	

# High Schools, Colleges, Universities Attended Location Dates Received Major Minor

# EMPLOYMENT HISTORY

# LIST MOST RECENT FIRST

Employer	Complete Address	Date Employed	Type of Work	Name of Supervisor	Reason for Leaving
				-	-
Present or last sala	ary:				
Are you presently	under contract?		If yes, when doe	es it expire?	
<u>CERTIFICATIO</u>	N AND LICENSING	$\overline{\underline{I}}$			
	s you are certified teach in Michigan	Certificates and Licenses Held Date Issued			ssued
UNITED STATE	S MILITARY RECO	<u>PRD</u>			
Branch of US Se	rvice		From	To	
Rank:		Type and date of	discharge		
Present draft or m	ilitary status				

# <u>REFERENCES</u> (List at least three other than those in placement credentials)

Name	Address	Phone	Position
Have you ever been dismiss	sed, asked to resign, or refused ree	mployment as a teacher	?
Yes No	If yes, explain:		
	ted of a felony or misdemeanor oth		
-	•		
Yes No	If yes, give details:		
Are you presently under arr	rest for a pending felony charge?		
Yes No	If yes, give details:		

# COLLEGE EXTRACURRICULAR ACTIVITIES

List any extracurricular activities you participated in during college:

# EXPERIENCE WORKING YOUTH

List experience you have had working with youths of school age, such as summer camp counseling, etc.
Before final consideration for employment, applicant must have on file in the personnel office a complete transcript of college credits, placement references and evidence of eligibility for certification. I understand that I must complete a criminal records check at my own expense. Arrangements should be made by contacting the Personnel Office.
I hereby authorize the investigation of all statements contained in this application. Permission is given to contact references and employers. I understand that this application will become part of mypermanentfile and that any misrepresentations, misleading or untruthful statement or omission is cause for dismissal.
The Alpena-Montmorency-Alcona Educational Service District assures compliance with all regulations regarding hiring as outlined in the provisions of Title IX of the Educational Amendments, Title VII of the Civil Rights Act, Section 504 of the Vocational Rehabilitation Act of 1973, Acts 220 and 453.
It is the policy of this District that no candidate for a position in this District shall be discriminated against on the basis of race, color, religion, national origin or citizenship status, creed or ancestry, age, gender, martial status, non disqualifying disability, height, or other protected categories.
In accordance with Federal law, any person employed by this District must provide evidence that s/he is eligible to work in the United States.
Date Signature

# Alpena-Montmorency-Alcona Educational Service District 2118 U.S. 23 S. Alpena, MI 49707

## Request/Consent for Release of Information From Current or Former Employer

## Required under Act 451 of Public Acts of 1976, section 1230b

In connection with my application for employment through Alpena-Montmorency-Alcona Educational Service District, I hereby authorize them, or their agents, to request from my current or former employers the disclosure of any unprofessional conduct and to make available to the Alpena-Montmorency-Alcona Educational Service District copies of documents in my personnel files maintained by the current or former employer relating to that unprofessional conduct.

I release any current or former employer, any person and his or her employer from any claim of liability for disclosure of information concerning me to Alpena-Montmorency-Alcona Educational Service District, or their agents.

It is my understanding that any information obtained in the course of this release investigation will be held strictly confidential by Alpena-Montmorency-Alcona Educational Service District, and their agents. Information gathered will be used only for the purpose of evaluating an applicant's qualifications for employment in the position for which he or she has applied.

Alpena-Montmorency-Alcona Educational Service District shall not hire an applicant who does not sign this statement, as described in Act 451 of Public Acts of 1976, section 1230b, subsection (I).

#### \*THIS IS A RELEASE OF INFORMATION\*

#### **Read Carefully**

Signature of Applicant	Date
Witness	Date

It is the responsibility of the applicant to mail this form to the former employer. Complete your name and social security number below.

## TO BE COMPLETED BY CURRENT/FORMER EMPLOYER

Act No. 451 of Michigan Public Acts of 1976 as amended by section 1230b.

#### **Return of Information:**

This information must be returned no later than 20 business days after receiving this request.

# Return completed form to:

Alpena-Montmorency-Alcona Educational Service District Attn: Personnel Department 2118 U.S. 23 S. Alpena, MI 49707

Applicant's SS#: Employment dates: from to	
Unprofessional conduct while employed: Yes No	
If yes, please answer the following questions:	
Date/dates of incident:	
Copies or documentation enclosed: Yes No	
Reason for leaving employment: Discharged Resigned Other	
Current/Former Employer's Name:	
Name of Company Official Preparing this Document:	
Title: Date:	

For further information, please contact the Superintendent, Alpena-Montmorency-Alcona Educational Service District at (989) 3 54-3 1 0 1.