

Application for Employment

Applying for: ☐ Full Time ☐ Part Time ☐ Consultant/Other

Soc. Sec. ____/____/____

Date: _____

Name: _____
Last First Middle

Present Address:

Street City State Zip

Phone: _____

Permanent Mailing Address: _____
(If Different) Street City State Zip

Phone: _____

Email address: (If applicable) _____

Position For Which You Are Applying: (Please be specific) _____

Instructions to Applicant: Thank you for your interest in employment with Atlanta Community Schools. This application form must be completed by any candidate for any job with Atlanta Community Schools, including those persons currently employed who are applying for a different job or job classification. If you are applying for more than one type of work, you must complete a separate application for each type of work sought. Please **TYPE** or **PRINT** and fill out both sides of this application completely. *Incomplete applications will not be considered.*

Statement of Assurances: Atlanta Community Schools is an equal opportunity employer. It is the policy of the District not to unlawfully discriminate on the basis of handicap, disability, race, religion, national origin, sex, age, marital status, height or weight. The District reaffirms its policy to comply with the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Elliott-Larsen Civil Rights Act, the Michigan Handicappers' Civil Rights Act, the Americans with Disabilities Act of 1990, and all other applicable Federal and State laws and regulations prohibiting discrimination.

General Information

Are you at least 18 years of age? ☐ Yes ☐ No

Have you ever been convicted of, or entered a guilty plea, to a felony? ☐ Yes ☐ No

If yes, for what offense: _____

Amount of Time Served: _____

Are you a citizen of the U.S.A.? ☐ Yes ☐ No

If "No", do you have a legal right to remain permanently in the U.S.A.? ☐ Yes ☐ No

Are you currently under arrest for a pending felony charge: ☐ Yes ☐ No

If "yes", what charge? _____

Have you ever worked for Atlanta Community Schools before?

☐ Yes ☐ No

Do you have any physical or mental impairment which, with or without reasonable accommodation, would interfere with your ability to perform the essential functions of the job for which you are applying? ☐ Yes ☐ No

In what capacity/position? _____

Do you have any relatives employed by the District? ☐ Yes ☐ No

If "yes", give name and relationship _____

Education/Training

	Name of School	City/State	Dates of Attendance	Diploma, Degree or Certificate Earned
Vocational/Technical				
High School				
Junior College				
College/University				
Other				

Employment Experience (List all employers for the last 6 years - military service included)

Name and Location of Previous Employment (most recent first)	Dates	Nature of Work (be specific)	Supervisor

Date when you could begin working if selected: _____

If currently employed, may we contact your employer? ☐ Yes ☐ No ☐ Only if a job has been offered

Present or Last Salary/Wage: _____
(Indicate annual, hourly)

Please list professional (work or career related) organizations, societies or activities in which you participate and any offices held:

1. _____
2. _____
3. _____

References

(Please list 3 personal or business references other than prior employers or relatives.)

Name	Address	Occupation	Telephone

Have you received a disciplinary suspension or been discharged from any position(s) within the past four years? ☐ Yes ☐ No ☐ If "yes", please explain:

Please list any scholarships, Academic Honors, Awards or Prizes you have received:

Some positions at Atlanta Community Schools require evening or weekend work or travel on occasion. Are you available for such work or travel if required/expected as part of the job expectations for the position for which you are applying? ☐ Yes ☐ No If "no", please explain:

Please list any special skills, abilities, strengths or talents you could bring to the job for which you are applying: _____

Candidate's Statement (All Applicants are to Complete)

In the space below, and IN YOUR OWN HANDWRITING, please give a brief statement of why you feel you would be a good employee for the Atlanta Community Schools if hired. Please confine your statement to this space. To be considered for employment, you must complete this section and SIGN AND DATE the statement at the bottom of this page. If any additional materials are needed, we will contact you. Thank you for applying!

**PLEASE READ ALL OF THE FOLLOWING CAREFULLY BEFORE SIGNING. YOUR
SIGNATURE SIGNIFIES THAT YOU EXPRESSLY AGREE WITH ALL OF THE**

FOLLOWING: "I certify that the facts set forth in my Application for Employment, in my resume and in any other materials I may have submitted in connection with this Application for Employment are true and complete. I understand that any false, misleading or incomplete information will result in disqualification from employment with the Employer or in dismissal from employment if an offer of employment has been made and accepted. I hereby authorize Atlanta Community Schools (hereinafter "The District"), to contact all my former and current employers, educational institutions and the other references I have provided regarding me and my performance record and work, academic and/or military experience. I hereby authorize my current and former employers to disclose to the District all requested information, including, but not limited to, any information concerning any unprofessional conduct by me, and to make available to the District copies of all documents maintained in my personnel record, including, but not limited to, any information concerning any unprofessional conduct by me. I also hereby release the District and its employees and agents, an all of my former and current employers, educational institutions, and the other references I have provided, from any and all liability and damages for releasing in good faith, or using, information concerning me and my performance record and work, academic and/or military experience. I also hereby waive any right under the Bullard-Plawecki Right to Know Act, 1978 PA 397, to receive written notice from the District or any former or current employer, that disciplinary reports, letter of reprimand, or other disciplinary action taken against me while employed, will be or have been disclosed to a third person or entity. I also understand that the District may conduct or have conducted by an individual or entity of its choice, a conviction-only criminal background history search on me. I hereby consent to this search being conducted and to the disclosure of the results of that search by the individual or entity conducting the search to the District. I further hereby release the individual or entity conducting the search, the District and its employees and agents, from any and all liability, claims and damages, including, but not limited to, claims for releasing or using any information revealed as a result of this search. I also understand and acknowledge that criminal convictions will result in disqualification from employment with the District or in dismissal from

employment if an offer of employment has been made and accepted. In consideration of my employment, I agree and understand that my employment and compensation can be terminated with or without cause, with or without notice, at either my option or at the option of the District, it being mutually understood and agreed that my relationship with the District is one of employment at will, as conditioned by applicable collective bargaining agreements, and no representative of the District, other than the Board of Education of the District or the Superintendent of the District, if so designated by the Board of Education, has any authority to enter into any agreement for employment for any period of time or to make any agreement contrary to the foregoing. I hereby consent to having a physical examination and/or test(s) conducted by a physician or other professional of the District's choice, and understand that any continuance of employment following an initial offer of employment, if made, is conditioned upon the results of this examination(s) and/or test(s). If I am employed, I understand that additional personal data will be required for determination of benefit eligibility and for statistical purposes. I will abide by all policies, rules and regulations, as amended from time to time, of the District."

Atlanta Community Schools Application Form Revised 3/19

Applicant Signature: _____ Date: _____

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