

CRIPPLE CREEK-VICTOR SCHOOL DISTRICT RE-1
410 North B Street/P. O. Box 897
Cripple Creek, Colorado 80813

EMPLOYMENT APPLICATION

Date: _____

*Note to applicant: This application form is intended for use in evaluating your suitability for employment. It is not an employment contract. Please answer all appropriate questions completely and to the best of your ability. **Any offer of employment will be based on the assumption that all information provided was truthful and not misleading. If an applicant is hired, and it is subsequently determined that applicant provided false or misleading statements in this Application, Employer may immediately revoke its offer of employment and immediately terminate applicant's employment and benefits.** Federal law provides penalties for false statements or documents related to U.S. employment eligibility. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of handicaps, and such information may be omitted from this form. Additional testing of job-related skills, mental/physical abilities, physical condition and for the presence of drugs in your body may be required prior to employment.*

Resumes and other documents may be attached to this application. However ALL candidates must answer ALL questions and complete ALL portions of this application to be considered for a position with the Cripple Creek-Victor School District RE-1.

Position desired: _____ Date available: _____

Name _____ Social Security No. ____ - ____ - ____

Have you worked under another name? Yes__ No__ Name _____

Home address _____ Telephone: _____

Mailing address _____

Check employment desired: Fulltime () Part-time () Temporary ()

Are you:

() Yes () No A past employee of this school district?
Dates: _____ Position _____

() Yes () No 21 years of age or older?

() Yes () No Able to prove that you are authorized to work in the United States?

() Yes () No Willing to work overtime when it is required?

() Yes () No Willing to undergo a physical examination, drug, alcohol or other test, if offered a position by the school district?

() Yes () No Willing to be finger-printed and have a background check performed pursuant to House Bill 90-1077?

() Yes () No Able to perform the essential functions listed on the attached job description (if applicable)?

() Yes () No

Have you ever been convicted of, **pled guilty or entered a plea of nole contender to**, a crime other than a **minor** traffic violation? **Note: convictions for driving under the influence of drugs or alcohol or vehicle homicide are not considered "minor" violations** (Convictions are not automatic disqualification from employment.) If yes, list dates, offenses and convictions below (please attach additional pages if necessary).

1. _____

2. _____

EDUCATION AND TRAINING

High school (circle years completed 1 2 3 4 GED Diploma

Name and Location _____

City

State

College/Technical Schools

Technical Education

| Name of School | Location | Dates Attended | Degree |
|----------------|----------|----------------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Undergraduate Education

| Name of School | Location | Dates Attended | Degree |
|----------------|----------|----------------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Majors

Credit Hours (Indicate Qtr or Sem Hours)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Minors

Credit Hours (indicate Qtr or Sem Hours)

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Graduate Education

| Name of School | Location | Dates Attended | Degree |
|----------------|----------|----------------|--------|
| | | | |
| | | | |

Majors Credit hours (indicate Qtr or Sem Hours)

Minors Credit Hours (indicate Qtr or Sem Hours)

Official transcripts must be presented prior to the offer of a contract. You may request that a confidential file be mailed from a placement bureau however all transcripts and files must be from the originating source.

Other training or skills: e.g. office machines, computers, tools, light or heavy equipment (explain)

EMPLOYMENT HISTORY

List **ALL** employment positions that you have held for the past ten (10) years beginning with your current or most recent job and working backwards. **ALL** information requested in this section must be furnished, including explanations of gaps in time. RESUMES MAYBE ATTACHED AS SUPPLEMENT TO THIS INFORMATION, BUT NOT AS A REPLACEMENT. Individuals who are applying for a teaching position should list all positions held.

1) Present/Last Employer _____
 Address: _____
 Start date _____ End Date _____ Job Title _____
 Supervisor's name: _____ Business Phone _____
 Essential duties (if teaching, note grades taught)

Salary/Wage _____ May we contact employer () yes () no
 Reason for leaving: Resigned (), Retired (), Asked to Resign (), Laid Off (),

Discharged (), Quit (), Other (). Explain

2) Employer _____

Address: _____

Start date _____ End Date _____ Job Title _____

Supervisor's name: _____ Business Phone _____

Essential duties (if teaching, note grades taught)

Salary/Wage _____ May we contact employer () yes () no

Reason for leaving: Resigned (), Retired (), Asked to Resign (), Laid Off (),
Discharged (), Quit (), Other (). Explain

3) Employer _____

Address: _____

Start date _____ End Date _____ Job Title _____

Supervisor's name: _____ Business Phone _____

Essential duties (if teaching, note grades taught)

Salary/Wage _____ May we contact employer () yes () no

Reason for leaving: Resigned (), Retired (), Asked to Resign (), Laid Off (),
Discharged (), Quit (), Other (). Explain

4) Employer _____

Address: _____

Start date _____ End Date _____ Job Title _____

Supervisor's name: _____ Business Phone _____

Essential duties (if teaching, note grades taught)

Salary/Wage _____ May we contact employer () yes () no
Reason for leaving: Resigned (), Retired (), Asked to Resign (), Laid Off (),
Discharged (), Quit (), Other (). Explain

5) Employer _____
Address: _____
Start date _____ End Date _____ Job Title _____
Supervisor's name: _____ Business Phone _____
Essential duties (if teaching, note grades taught)

Salary/Wage _____ May we contact employer () yes () no
Reason for leaving: Resigned (), Retired (), Asked to Resign (), Laid Off (),
Discharged (), Quit (), Other (). Explain

Other Activities

List other activities which may be of interest, for example team teaching,
curriculum work, special projects, travel etc.

List professional organizations in which you are active

Any other extra or co-curricular activities?

Applications are maintained for 3 months from the date. No further correspondence will be sent to applicants if there are no vacancies for which they are considered. Interviews will be requested of applicants who are designated as finalists for a position.

I certify that I have read and understand the applicant note and all other information presented on this form. I unconditionally certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I authorize the school district and/or its agents including, but not limited to consumer reporting bureaus to verify any of this information, including, but not limited to criminal history and motor vehicle driving records. I understand that any omission, misleading or falsely answered statement made or implied by me on this application or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice of process.

Signature

Printed Name

Date