**APPLICATION FOR EMPLOYMENT**

If you require any assistance or accommodation in the application or interview process, please Contact the District Secretary, Angie Wisehart, at (217) 852-3204.

**PERSONAL INFORMATION** Date: Click here to enter text.

Name (Last, First MI) Click here to enter text.

Phone Number Click here to enter text.

Present Address Click here to enter text.

Permanent Address Click here to enter text.

Referred By Click here to enter text.

Email Address Click here to enter text.

*It is the policy of the Dallas Elementary School District #327 to comply with all federal and state employment laws. District 327 is an equal opportunity employer and does not discriminate on the basis of race, age, marital status, color, creed, religion, sex, national origin, ancestry, citizenship status, arrest record, being a victim of domestic or sexual violence, mental or physical handicap or disability, use of lawful products during non-working hours, military status or unfavorable discharge from military service or any other unlawful basis in the hiring, promotion, firing, pay or privileges of employment.*

Are you 18 years of age or older? Yes [ ]  No [ ]

Can you, after being hired, verify your legal right to work in the U.S.? Yes [ ]  No [ ]

Have you ever been convicted of a felony or criminal misdemeanor? Yes [ ]  No [ ]

If “Yes” please describe below. (You are not required to disclose any convictions for which the records have been expunged, impounded or sealed.)

Click here to enter text.

**EMPLOYMENT DESIRED**

Position Click here to enter text. Date You Can Start Click here to enter text.

Are you employed now? Yes [ ]  No [ ]

May we contact your current employer? Yes [ ]  No [ ]

Have you ever applied to the district before? Yes [ ]  No [ ]

Do you fluently speak a foreign language? Yes [ ]  No [ ]

If “Yes”, what foreign language(s) do you speak? Click here to enter text.

Do you have US Military, Naval Service? Yes [ ]  No [ ]

If “Yes”, note rank Click here to enter text.

Are you now or in the past a member of National Guard or Reserve? Yes [ ]  No [ ]

Are you able to perform all essential job functions of the position for which you are applying, with or without reasonable accommodation? Yes [ ]  No [ ]

(A copy of the job description is available upon request)

**EDUCATION**

High School Name Click here to enter text. Location Click here to enter text.

Dates attended Click here to enter text. Graduated Yes [ ]  No [ ]

College/University Name Click here to enter text. LocationClick here to enter text.

Dates attended Click here to enter text. Graduated Yes [ ]  No [ ]

Degree(s) earned Click here to enter text.

College/University Name Click here to enter text. LocationClick here to enter text.

Dates attended Click here to enter text. Graduated Yes [ ]  No [ ]

Degree(s) earned Click here to enter text.

College/University Name Click here to enter text. LocationClick here to enter text.

Dates attended Click here to enter text. Graduated Yes [ ]  No [ ]

Degree(s) earned Click here to enter text.

**FORMER EMPLOYERS** (List below last four employers, starting with the most recent first.)

1. Name and Address Click here to enter text. Date Month/Year FromClick here to enter text. To Click here to enter text.

Position Click here to enter text. Salary Click here to enter text.

Reason for Leaving Click here to enter text.

2. Name and Address Click here to enter text. Date Month/Year FromClick here to enter text. To Click here to enter text.

Position Click here to enter text. Salary Click here to enter text.

Reason for Leaving Click here to enter text.

3. Name and Address Click here to enter text. Date Month/Year FromClick here to enter text. To Click here to enter text.

Position Click here to enter text. Salary Click here to enter text.

Reason for Leaving Click here to enter text.

4. Name and Address Click here to enter text. Date Month/Year FromClick here to enter text. To Click here to enter text.

Position Click here to enter text. Salary Click here to enter text.

Reason for Leaving Click here to enter text.

**REFERENCES** Provide names and contact information of three persons not related to you.

Name Click here to enter text.

Business Click here to enter text. Years acquainted Click here to enter text.

Phone Click here to enter text. Address Click here to enter text.

Name Click here to enter text.

Business Click here to enter text. Years acquainted Click here to enter text.

Phone Click here to enter text. Address Click here to enter text.

Name Click here to enter text.

Business Click here to enter text. Years acquainted Click here to enter text.

Phone Click here to enter text. Address Click here to enter text.

I hereby authorize the District to conduct work history and reference checks, including information obtained through personal interviews with persons named as employers and references, to determine my acceptability for employment. Pursuant to the *Illinois Personnel Record Review Act*, 820 ILCS 40/0.01 *et seq*., I hereby waive written notice from my current employer and any previous employers and authorize them to release information regarding any disciplinary actions taken against me within the past four years. Further, I hereby release the officers, agents, employees and directors of each of my current and past employers and Dallas Elementary School District # 327, its officers, agents and employees, from any and all liability arising from disclosure of personnel records and from verbal appraisals of my past performance.

I hereby authorize Dallas Elementary School District #327 to forward my name to the Illinois Department of State Police for the purpose of conducting a criminal background investigation as required by Section 10-21.9, of the School Code, and agree to execute any forms required by said department for such purpose. I understand that the District may further conduct a check for any indicated reports of child abuse pursuant to the *Abused and Neglected Child Reporting Act,* 325 ILCS 5/1 *et seq*. Further, I hereby indemnify, save and hold harmless the District, and its officers, agents and employees from any claim of liability or damage which may arise from the proceedings of the Illinois State Police or Department of Children and Family Services in conjunction with the above background investigations.

I understand that an offer of employment, or continued employment if hired, is contingent upon my passing the Illinois State Police and Child Abuse Registry background investigations and submitting the required Form I-9, including evidence of identity and work authorization, the health and medical examination forms, including TB test results, and any other forms required by the District, or by state or federal law.

I hereby certify that the statements set forth in this application for employment are true, accurate and complete to the best of my knowledge, and understand that any misrepresentations or omissions of facts made by me on this application shall be sufficient cause for my disqualification for employment or termination of employment if hired. I understand that, pursuant to Section 22-6.5 of the School Code, if I am an applicant for the position of teacher, principal, superintendent or any other certificated position, I may be guilty of a Class A misdemeanor for failing to provide requested employment or employer history which is material to my qualifications for employment for providing statements which I do not believe to be true. I further understand that pursuant to Section 17-22 of the *Criminal Code*, 720 ILCS 5/17-22, any applicant who willfully furnishes false information regarding professional certification, licensing, criminal background, or employment history may be guilty of a Class A misdemeanor. I understand that before any contract or employment for a certificated position becomes effective, and before compensation is possible for employment in positions requiring certification, a valid Teaching Certificate must be filed in the Office of Educational Service Region, and that if I accept a contract to teach in the District, the above statements are to become part of my permanent record.

I understand that this application and records provided become the property of the District.

Application date Click here to enter text.

Signature of Applicant Click here to enter text.

Please email, mail or drop off your completed application to:

Dawn Enzeroth, District Secretary

921 Creamery Hill Road

Dallas City, IL 62330

denzeroth@dallascity.k12.il.us