



**Learning for Life**  
**CENTRAL LAKE PUBLIC**  
**SCHOOLS**  
 8169 West State Street  
 P.O. Box 128  
 Central Lake, MI 49622  
 231.544.3141  
 231.544.2903 FAX

For Office Use Only

**APPLICATION FOR EMPLOYMENT**

**Please type or print all information.**

**GENERAL:**

1. Name of Applicant \_\_\_\_\_ Maiden Name: \_\_\_\_\_
2. Address \_\_\_\_\_ 3. Telephone No. \_\_\_\_\_
4. Are you a United States citizen? Yes \_\_\_ No \_\_\_ Social Security Number \_\_\_\_\_
5. How long have you resided at your current address? \_\_\_\_\_
6. Position desired: \_\_\_\_\_
7. When would you be available to begin work? \_\_\_\_\_

**EDUCATION:** (List most recent first)

<u>High Schools/Colleges And Universities</u>	<u>Location</u>	<u>Degrees Received</u>	<u>Major</u>	<u>Minor</u>

**COMPLETE EMPLOYMENT HISTORY** (List most recent first.)

<u>Employer</u>	<u>Complete Address</u>	<u>Telephone Number</u>	<u>Dates Employed</u>	<u>Type of Work</u>	<u>Reason for Leaving</u>

Present or last salary \$ \_\_\_\_\_ Are you presently under contract? Yes \_\_\_ No \_\_\_  
 If yes, when does it expire? \_\_\_\_\_

**CERTIFICATION, LICENSING AND APPROVAL**

<u>Certificates and Licenses Held</u>	<u>Subjects or areas you are certified and licensed to teach in Michigan</u>	<u>Date Issued</u>

**MILITARY RECORD**

Branch of United States Service \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Rank \_\_\_\_\_ Type of Discharge \_\_\_\_\_  
 Present draft or military status \_\_\_\_\_

**MEDICAL HISTORY**

Do you have any impairments, physical, mental, or medical which would interfere with your ability to do the job(s) for which you have applied? Yes \_\_\_ No \_\_\_ If yes, explain. \_\_\_\_\_

Are there any positions for which you should not be considered or job duties which you cannot perform because of a physical or mental handicap? Yes \_\_\_ No \_\_\_ If yes, explain. \_\_\_\_\_

Are you able to perform the tasks of the job for which you are applying with or without accommodations?  
 Yes \_\_\_\_\_ No \_\_\_\_\_ If with accommodations, how would you perform the tasks and with what accommodations?  
 \_\_\_\_\_

A person regarded as a successful applicant will be required to have a pre-employment physical which includes drug testing.

GENERAL

Have you ever been dismissed, asked to resign, or refused re-employment? Yes \_\_\_\_ No \_\_\_\_  
Approximate Date: \_\_\_\_\_ If yes, please explain. \_\_\_\_\_

Have you ever been arrested? Yes \_\_\_\_ No \_\_\_\_ Approximate Date: \_\_\_\_\_  
If yes, give details \_\_\_\_\_

Have you ever been convicted of or plead no contest to any kind of crime? Yes \_\_\_\_ No \_\_\_\_  
If yes, when? \_\_\_\_\_

For what? \_\_\_\_\_  
Where? \_\_\_\_\_

Are there any current criminal charges pending against you? Yes \_\_\_\_ No \_\_\_\_  
If yes, give details. \_\_\_\_\_

EMPLOYMENT REFERENCES (List three other than those in placement credentials or former employers.)

<u>Name</u>	<u>Address</u>	<u>Phone Number</u>	<u>Years Known</u>	<u>Relationship</u>

EXPERIENCE WORKING WITH YOUTH

List experience you have had working with youth of school age, such as summer camp counseling, etc. \_\_\_\_\_

DRIVING RECORD (You do not need to complete this if you are applying for a secretarial/office position.)

Driver's License Number \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**PRE-EMPLOYMENT INVESTIGATION AND PHYSICAL EXAMINATION APPLICANT ACKNOWLEDGEMENT, AUTHORIZATION, CONSENT AND RELEASE**

I, the undersigned Applicant for employment with the Central Lake Public School District, do hereby acknowledge, authorize, and consent to a pre-employment investigation to be conducted by agents of Central Lake Public School District for the purpose of confirming and verifying the contents of my application for employment, resume, and/or letter of interest submitted by me and/or to confirm or verify any verbal representations made or to be made by me with respect to my consideration for employment with the Central Lake Public School District.

Further, I do hereby acknowledge, authorize, and consent to agents of the Central Lake Public School District to contact any or all of my personal references, former or current employers, and any other persons and organizations deemed necessary by the investigating agents for the purpose of making pre-employment inquiries and obtaining information concerning my character, reputation, and/or work record and experience.

Also, I do hereby authorize and consent to agents of the Central Lake Public School District to contact any child protection agencies or registries, law enforcement authorities, and/or judicial authorities and to make pre-employment inquiries and to obtain any information and/or records related to me to determine if I have committed or have been convicted of any crimes and if there are any felony charges pending, including the nature of the crimes committed and/or the pending felony charges.

I hereby authorize and consent to the release of any information, written or verbal, and/or any documentation regarding my character, reputation, work record and experience from any person, including my present and/or former employers, upon request of the agents of the Central Lake Public School District conducting the pre-employment investigation.

I do hereby waive written notice of the disclosure of any disciplinary reports, reprimands, and/or actions from my current or former employers.

Also, I do hereby release any person providing information and/or documents concerning my character, reputation, and/or work record and experience to agents from the Central Lake Public School District pursuant to the pre-employment investigation from any and all claims and/or liability whatsoever for any damages and/or consequences which may result there from.

I hereby acknowledge and understand that if I should be employed by the Central Lake Public School District, my application for employment and other related information as deemed appropriate for retention will become a permanent part of my personnel file; and that if any representations, omissions, or statements made by me during the pre-employment screening process, which are contained therein, are subsequently discovered to be false or misleading, the discovery thereof may result in my discharge.

In making this application for employment I understand that an investigation may be made whereby information is obtained through personal interviews or other contacts with my neighbors, friends or others with whom I am or have been associated or acquainted or who may have knowledge of the above information regarding me. These inquiries may include, as appropriate, information regarding me. These inquiries may include, as appropriate, information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request of the Central Lake Public School District, within a reasonable period of time, to receive additional and detailed information about the nature and scope of such investigation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

The Central Lake Public School District is an equal opportunity employer. It does not discriminate on the basis of race, color, national origin, creed, age, religion, sex (including sexual orientation and transgender identity), height, weight, marital or family status, military status, genetic information, or disability as a condition of employment. No person shall be denied employment solely because of any disability which is unrelated to the individual's ability to do the essential functions and duties of the job with or without accommodation. Under state law, a person with a disability condition may not allege a failure to accommodate a disabling condition unless the employer knew or reasonably should have known that an accommodation was needed.