

WEST CENTRAL C.U.S.D. #235
Henderson County, Illinois
1514 US Route 34
Biggsville, Illinois 61418-9711
309-627-2371
APPLICATION FOR EMPLOYMENT

West Central CUSD #235 is an Equal Opportunity Employer and will consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientations, or other legally protected status.

(Please Print)

Date: _____ Name: _____

Phone Number: _____ Email Address: _____

Present Address: _____

Position(s) applied for: _____

Would you work: Full-Time _____ Part-Time _____

Specify days and hours if Part-Time: _____

Were you previously employed by us? ____ If yes, when? _____

List any friends or relatives working for us: _____

Are you employed now? _____ May we Inquire of your present employer? _____

If your application is considered favorably, on what date will you be available for work? _____

Are you 18 years of age or older? _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? _____

(Proof of citizenship or immigration status will be required upon employment)

Have you been convicted of a felony with the last 7 years? ____ Yes ____ No

If yes, please explain: _____

Conviction will not necessarily disqualify an applicant from employment

EDUCATION

School	Name and Address of School	Course of Study	Last Year Completed	Did you graduate	List Diploma or Degree
Elementary					
Middle School					
High School					
College					
Other: Specify					

EMPLOYMENT

List below all present and past employment, beginning with your most recent

Name and Address of Company and Type of Business	From Mo/Yr	To Mo/Yr	Describe the work you did	Reason for leaving	Name and Phone Number of Supervisor

REFERENCES

Please provide the names of 3 persons not related to you.

Name	Address	Phone	Business

I hereby authorize the District to conduct work history and reference checks, including information obtained through personal interviews with persons names 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 waiver 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 West Central CUSD #235, its officers, agents, and employees, from any and all liability arising from disclosure of personnel record and from verbal appraisal as of my past performance.

I hereby authorize West Central CUSD #235 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 Child and Family Services in conjunction with the above background investigations.

I understand that an offer of employment if hired, is contingent upon my passing the Illinois State Police and Child Abuse Registry background investigations and submitting the required for 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 or 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 Illinois Teaching Certificate must be filed in the Regional Office of Education, 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: _____

Signature of Applicant: _____

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

West Central District Office
1514 US Route 34
Biggsville, IL 61418