

Loyalsock Township School District
1605 Four Mile Drive
Williamsport, PA 17701
(570) 326-6508

Non-Certified Personnel
Employment Application

(Please Print or Type)

Date of Application _____

Name _____
Last First Middle

Address _____

Telephone (_____) _____ Social Security Number _____

Cell phone (_____) _____ email _____

Employment Desired

Position(s) Desired _____

Full-Time _____ Part-Time _____ Substitute _____

Education

	Name & Address	Course	Diploma/Degree
High School			
Technical School			
College			
Graduate School			
Other			

Special Qualifications (If Appropriate)

List office machines you operate: _____

Employment History

List all full and part-time employment beginning with current or most recent.

Name & Address of Employer _____ _____ _____ _____ Telephone ()		Your Title _____ Work Performed _____ _____ _____
Dates of Employment		Name & Title of Supervisor
Name & Address of Employer _____ _____ _____ _____ Telephone ()		Your Title _____ Work Performed _____ _____ _____
Dates of Employment		Name & Title of Supervisor
Name & Address of Employer _____ _____ _____ _____ Telephone ()		Your Title _____ Work Performed _____ _____ _____
Dates of Employment		Name & Title of Supervisor
Name & Address of Employer _____ _____ _____ _____ Telephone ()		Your Title _____ Work Performed _____ _____ _____
Dates of Employment		Name & Title of Supervisor

References

List references that have first-hand knowledge of your character, personality, and ability.

<i>Name</i>	<i>Position</i>	<i>Address</i>	<i>Telephone</i>

Miscellaneous Data

List your hobbies, talents, unique skills, experiences, recent accomplishments, etc.

Please include any information about your reasons for wanting this position.

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## Certification and Release Authorization

I certify that all of the statements made by me are true, complete and correct to the best of my knowledge and belief, and made in good faith. I understand that any misrepresentation of information shall be sufficient cause for: (1) rejecting my candidacy; (2) withdrawing of any offer of employment; or (3) terminating my employment.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and respond fully and completely to all questions that officials of Loyalsock Township School District may ask regarding my prior work history and performance. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to this school district. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and release from liability all persons and/or entities supplying information regarding my background. However, I do not waive any rights, which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant (in ink)

### Act 34 (Pennsylvania State Police Request for Criminal Record Check)

Each Pennsylvania resident must submit with his/her employment application a copy of a report of Criminal History Record Information from the Pennsylvania State Police or a statement from the Pennsylvania State Police that the State Police Central Repository contains no such information relating to that person. Each out-of-state applicant must submit with his/her application for employment a copy of a federal criminal record history from the Federal Bureau of Investigation. The criminal record history report must be no more than one (1) year old. The applicant **must** submit the **original** report prior to employment.

### Act 114 (Federal Criminal History Background Check)

Each candidate must submit with his/her employment application a copy of the registration receipt from the Cogent Services Pennsylvania Department of Education. The receipt must be no more than one (1) year old.

### Act 151 (PA Child Abuse History Clearance)

Each candidate must submit with his/her employment application a copy of an official clearance statement obtained from the Pennsylvania Department of Public Welfare or a statement from the Department of Public Welfare that no record exists. The clearance statement must be no more than one (1) year old. The applicant **must** submit the **original** report prior to employment.

*Pennsylvania School Districts do not discriminate in their educational programs, activities, or employment practices based on race, color, national origin, sex, disability, age, religion, ancestry, or any other legally protected classification. This policy is in accordance with state and federal laws, including Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Sections 503 and 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, the Americans with Disabilities Act of 1990 and the Pennsylvania Human Relations Act. To obtain information relative to special accommodations, grievance procedure, and the designated responsible official for compliance with Title VI, Title IX, and Section 504 please contact the school district.*

*If you have any questions regarding this application or employment with the Loyalsock Township School District, please feel free to contact the District Office at (570) 326-6508.*

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#### For office use only

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|----------------------|--------------------|--------------------|-----------------|
| Interview/Date _____ | Act 151/Date _____ | I-9 _____          | Follow up _____ |
| Application _____    | Physical _____     | Act 114/Date _____ | Act 24 _____    |
| Act 34/Date _____    | TB/Date _____      |                    |                 |

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