

TEACHER
Application for Employment
Carlinville Community Unit School District #1
829 West Main Street, Carlinville, Illinois 62626-9238

Carlinville Community Unit School District #1 is an Equal Opportunity Employer. CUSD#1 does not discriminate in employment, and no question on this application is used for the purpose of limiting or excluding any applicant's consideration from employment on a basis prohibited by local, state, or federal law. All applications are retained by Carlinville CUSD#1 For a period of two years. However, to receive active consideration after one year, it is suggested that you update your application annually.

Personal Data

Date:

Name

Last

First

MI

SSN:

Temporary Address:

No.

Street

Phone No:

City, State, Zip

(Valid until:)

Permanent Address:

No.

Street

Phone No:

City, State, Zip

E-Mail

Position Data

Grade Level Desired:

Pre-K

1-3

4-5

6-8

9-12

Specific Position(s) for which applying:

Certification Data

- A. Do you have a valid Illinois State Teaching Certificate? Yes No
- B. If you do not have a valid Illinois Teaching Cert., have you applied for one? Yes No
- C. Do you have a valid teaching certificate from another state? Yes No
- D. What type(s) of Illinois Teaching Certificates, if any, do you hold or have applied for?
- E. Certification Number
- F. Have you passed the Illinois Certification Testing System (ICTS) Basic Skills Test and the appropriate ICTS Test(s) of subject-matter knowledge? Yes No
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Qualifications

According to the guidelines established by the Illinois State Board of Education, what are you certified to teach?

Subject Matter Area	Semester Hours	Subject Matter Area	Semester Hours

Under the criteria established by the U.S. Department of Education, please list the subject area in which you are considered highly qualified:

Subject Matter Area	Semester Hours	Subject Matter Area	Semester Hours

What extracurricular activities, e.g., sports, clubs, etc., are you able and willing to coach or sponsor?

Teaching Experience

List in chronological sequence all **paid** teaching experience in public and private schools. Show part-time experience as a fraction or a percent in “years of service” column.

Employer, City, State	Position/Grade Level Subject if Departmentalized	Inclusive Dates From/To	Years of Service

Educational and Professional Training

College or University City, State	Degree or Semester Hours	Major(s) or Area(s) of Concentration	Cum GPA A=4.0

Are you a Veteran?	Yes	No
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Reason for interest in position with Carlinville CUSD#1:

Provide complete and accurate information with respect to your reason(s) for your interest in a position with CUSD#1. If you are presently employed, please explain why you are willing to leave your present position. (Being vague or making errors or omission is sufficient reason to reject an application.)

Professional References

List three (3) professional references who can vouch for your character and qualifications with preference given to principals and supervisors under whom you have most recently worked.

Name	Position	Address, City, State, Zip	Phone No.

Other Information

In order to be considered for a position, all applicants must complete this section.

- Are you capable of performing all of the essential functions for this job, with or without reasonable accommodations? Yes No
- For the purpose of compliance with the Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes No
- Under the immigration Reform and Control Act of 1986, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect should you be employed.
- Have you ever been “indicated” by the Department of Children and Family Services as a person who engaged in child abuse or neglect under the Illinois Abused and Neglected Child reporting Act, or by any state agency of another state under a similar law?
 Yes No If yes, please explain.
- Do you give Carlinville CUSD#1 Permission to conduct an “Illinois Criminal Background Investigation” and a “Motor Vehicle Report”? Yes No
- Do you give permission to release information contained in this application to other school districts if Carlinville CUSD#1 does not employ you? Yes No

I declare the foregoing, to the best of my knowledge, to be an accurate and complete statement of facts. I understand that the failure to provide requested information or any false statement herein will serve as cause for rejection of the application or, if discovered later, for discharge. I authorize past schools, employers, and person whom I have listed herein as personal references to disclose information about me, including the names of other persons from whom information may be obtained related to my academic and work experience, and my suitability for the position for which I am applying. Furthermore, I understand that my employment is subject to satisfactory replies from references, and I hereby relieve Carlinville CUSD #1 and all references from any and all liability concerning the release of confidential information. Furthermore, I acknowledge that employment is contingent upon and subject to a post offer physical, a background check, and the Illinois Criminal Background Investigation. If accepted for employment, I hereby agree to obey all rules and regulations.

Applicant's Signature

Date