Central Lyon Community School

Serving Rock Rapids, Doon and Surrounding Area

Our New Address:

Central Lyon Community School
1010 S. Greene Street
Rock Rapids, IA 51246

CLASSIFIED OR CERTIFIED STAFF EMPLOYMENT COVER LETTER

It is the policy of the Central Lyon Community School District will not discriminate in its educational activities on the basis of race, color, national origin, creed, socio-economic status, religion, sex, disability, sexual orientation, gender identity or marital status in its educational programs, activities, or employment policies as required by Title VI and VII of the 1964 Civil Rights Act, Title IX of the 1972 Education Amendments, and the Federal Rehabilitation Act of 1973.

It is also the policy of this district that the curriculum content and instructional materials utilized reflect the cultural, racial, and sexual diversity present in the United States and the various careers, roles, and life styles open to women as well as men in our society. One of the objectives of the total curriculum and teaching strategies is to reduce stereotyping and to eliminate bias on the basis of race, color, national origin, creed, socio-economic status, religion, sex, disability, sexual orientation, gender identity or marital status. The curriculum should foster respect and appreciation for the cultural rights, duties, and responsibilities of each individual as a member of multicultural, nonsexist society.

It is the policy of Central Lyon Community School District to provide equal educational and employment opportunities and not to illegally discriminate on the basis of race, creed, color, national origin, religion, sex, sexual orientation, gender identity, age, disability, socioeconomic status or marital status in its educational programs, activities, or its employment and personnel policies. The District shall comply with the Iowa Veterans' Preference Law. Affirmative steps be taken to integrate students in attendance centers, programs, and classes on the basis of race, national origin, gender and disability. The Central Lyon Community School District is an EEO/AA employer

The Central Lyon Schools shall provide program activities, a curriculum and instructional resources which will reflect the racial and cultural diversity present in the United States and the variety of careers, roles and life styles open to both men women in our society. One of the objectives of Central Lyon's programs, curriculum, services and teaching strategies is to reduce stereotyping and to eliminate bias on the basis of race, creed, color, national origin, religion, sex, sexual orientation, gender identity, age, disability, socioeconomic status or marital status. The curriculum, programs and services shall foster respect and appreciation for the cultural diversity found in our country and an awareness of the rights, duties and responsibilities of each individual as a member of a pluralistic society.

It is the policy of the Central Lyon Schools to affirmatively recruit women and men, members of diverse racial/ethnic groups and persons with disabilities for job categories where they are underrepresented. A fair and supportive environment will be provided for all students and employees regardless of their race, creed, color, national origin, religion, sex, sexual orientation, gender identity, age, disability, socioeconomic status or marital status. Harassment of a sexual nature or with demeaning intent related will not discriminate in its educational activities on the basis of race, color, national origin, creed, socio-economic status, religion, sex, disability, sexual orientation, gender identity or marital status, made from one employee to another, from an employee to a student or vice versa, and from one student to another is a violation of this policy.

Inquiries or grievances related to this policy may be directed to Superintendent David Ackerman, 1105 S. Story Street, P.O. Box 471, Rock Rapids, Iowa (712) 472-2664, to the Director of the Iowa Civil Rights Commission in Des Moines, the Director of the Region VII Office of Civil Rights, United States Department of Education in Kansas City, MO. Inquiries may also be directed to the Director, Iowa Department of Education, Grimes State Office Building, Des Moines, IA 50319.

The mission of the Central Lyon Community School District is to provide an education and the opportunity for all students to become productive, life-long learners.

Central Lyon Community School District
Certified Staff Application

General Information

Application Date _____ Date Available: _____

First Name: _____ Middle Initial: _____ Last Name: _____

Social Security Number: _____

Are you eligible to work in the United States? **Yes** **No**

Current Home Phone: _____ Work Phone: _____

Permanent Phone: _____

Current Address: _____

Permanent Address: _____

Position(s) for which you are applying: _____

Are you available full time? **Yes** **No**

Are you willing to consider less than full time? **Yes** **No**

Are you under a teaching contract for next year? **Yes, Where?** _____ **No** _____

Have you applied for your Iowa Teacher License? **Yes** **IA Folder Number:** _____ **No**

Do you hold a license from another state? **Yes, If so, which state(s)?** _____ **No**

What certifications, endorsements or approvals have you achieved (including coaching authorization)?

_____

Have you previously held a licensed position in an Iowa public school? **Yes** **No**

District: _____

Have you successfully completed an official probationary period in a public school district? **Yes** **No**

If yes, what was the length of the probationary period? _____

Have you successfully completed a mentoring and induction program? **Yes** **No**

If yes, when? _____ **If no, have you completed:**

One year _____ **Two years but have been recommended for a third year** _____

Three years and am not being recommended for a professional license _____

None _____

Are you on a sex offender registry? **Yes** **No**

Have you ever been convicted of a felony or misdemeanor (excluding traffic violations)? **Yes** **No**

Please provide date, incident, city/state of charge: _____

Responding "yes" to any of the previous questions is not an automatic bar to employment. The date of the offense, and the relationship between the offense and the position for which you are applying will be considered.

Are you able to perform, with or without reasonable accommodation, the essential job functions required of this position? **Yes** **No** **If no, explain:** _____

Education

Circle Highest Degree: Associates, Bachelor's, Master's, Doctorate, Other _____

High School Attended: _____ Location: _____

Have you served in the Military? **Yes** **No**

If yes, I served in these wars and/or conflicts: _____

College: _____ Location: _____

Degree & Major/Minor: _____

Number of Hours Beyond Highest Degree: _____

College: _____ Location: _____

Degree & Major/Minor: _____

Number of Hours Beyond Highest Degree: _____

College: _____ Location: _____

Degree & Major/Minor: _____

Number of Hours Beyond Highest Degree: _____

Employment

School District/Employer: _____

Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Date Worked From: _____ Date Worked To: _____

Position: _____

Duties: _____

Reason For Leaving: _____

School District/Employer: _____

Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Date Worked From: _____ Date Worked To: _____

Position: _____

Duties: _____

Reason For Leaving: _____

School District/Employer: _____

Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Date Worked From: _____ Date Worked To: _____

Position: _____

Duties: _____

Reason For Leaving: _____

School District/Employer: _____

Employer Address: _____

Supervisor's Name: _____ Supervisor's Phone Number: _____

Date Worked From: _____ Date Worked To: _____

Position: _____

Duties: _____

Reason For Leaving: _____

Language Skills

Do you know any language other than English? **Yes** **No**

Language(s): _____

Oral Level: _____

Written Level: _____

Reference

Reference's Name: _____

Reference's Employer & Address: _____

Reference's Position: _____

Reference's Home Phone _____ Reference's Work Phone: _____

Reference's Name: _____

Reference's Employer & Address: _____

Reference's Position: _____

Reference's Home Phone: _____ Reference's Work Phone: _____

Reference's Name: _____

Reference's Employer & Address: _____

Reference's Position: _____

Reference's Home Phone: _____ Reference's Work Phone: _____

Application Verification

I hereby certify that the above information, to the best of my knowledge, is true, accurate and complete. Any misrepresentation or willful omissions of fact shall be sufficient cause for disqualification of this application or termination of employment. I authorize verification of any of this information. I authorize all current and former employers to release any information concerning my background. I understand that this application is not a contract of employment. I also understand that if hired, regardless of any oral representation to the contrary, the employment relationship is terminable-at-will.

Signature: _____ **Date:** _____

The Central Lyon Community School District is an EEO/AA employer.

Return to: Board Secretary, Central Lyon CSD, 1010 S. Greene St., Rock Rapids, IA 51246

APPLICANT COMPLETES

Release Authorization

In connection with my application for employment, I understand that an investigative consumer report may be requested that will include information as to my character, work habits, performance and experience, along with reason for termination and employment. I understand that as directed by company policy and consistent with the job described, you may be requesting information from public and private sources about my: worker's compensation injuries, driving record, court record, education, credentials and references.

Medical and worker's compensation information will only be requested with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my perspective employer from a consumer-reporting agency. If so, I will be notified and given the name and address of the agency or the source, which provided the information. I acknowledge that facsimile (FAX), photographic copy or email shall be as valid as the original.

I hereby authorize, without reservation, any law enforcement agency, institution, information service bureau, school, employer, reference or insurance company contacted by One Source, The Background Check Company or its agent, to furnish the information described above. I understand that in the event a negative hiring decision is made based upon the results of my background check, a report will be furnished to me upon my request.

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes. I hereby release the employer and agents and all persons, agencies, and entities providing information or reports about me from any and all liability arising out of the request for or release of any of the above mentioned information or reports.

PLEASE PRINT:

_____

Last Name *First Name* *Middle Initial (Required)*

_____

Other LEGAL names you have used, including MAIDEN name(s):

_____

Home Address

_____

City *State* *Zip*

Other addresses if less than 7 years at home address: (use back of sheet for additional addresses)

_____

Address *City* *State* *Zip*

_____

Address *City* *State* *Zip*

_____ _____

Social Security Number *Date of birth (Required)*

_____ _____

Driver's License # *State of Issue* *Name as it appears on license*

_____

SIGNATURE OF APPLICANT

ONE SOURCE, The Background Check Company
PO BOX 24148
OMAHA, NE 68124

PHONE: 402-333-9696
TOLL FREE: 800-608-3645
FAX: 402-333-3280