SCHOOL DISTRICT OF PITTSVILLE

EMPLOYMENT PROCEDURES FOR PITTSVILLE CHILD CARE CENTER (PCCC) CHILD CARE TEACHER

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1.	Secure application form in person, mail, telephone, or website (www.pittsville.k12.wi.us).
2.	Return the completed application form with a copy of each the following: Social Security Card Driver's License The Registry Certificate CPR/AED/First Aide Certificate or Card
3.	Please contact the Administration Office at (715) 884-6694 if you have a change of address or phone number, or if you receive employment elsewhere.
Pł	HASE II – APPLICATION SCREENING AND INTERVIEWS
1.	Applications will be screened by the District Administrator, Department Supervisor, or Business Manager.
2.	Candidates, when called for initial interviews, should arrange to have all necessary application materials on file with the school district.
3.	A criminal background check and Caregiver Background Check will be conducted prior to employment with the Schoo District.
	NOTICE TO APPLICANTS: If you require accommodation in the application process, please inform us.

SCHOOL DISTRICT OF PITTSVILLE

PCCC – CHILD CARE TEACHER EMPLOYMENT APPLICATION

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap, or marital or veteran status.

LAST NAME	FIRST NAME	M.I.				
		D	ATE:			
		STATE:		ZIP:		
: ()		E-MAIL:				
applied for employment w	vith us?					
		Location:				
			_		□ NO	
ng for:	ad Teacher	☐ Non-Lead Teach	her	□ Во	th	
<u></u>	_	ller Preschool Morning		_	☐ Any	
When will you be able to start?						
Are you legally eligible for employment in the United States? YES NO						
ED/First Aid Certified, inc	luding Infant/Toddler?	YES Expira	ation Date:		□NO	
Registry Certificate Level:			Expiration Date:			
EDUCATIONAL BACKGROUND						
NAME / LOC	ATION OF SCHOOL	# OF YEARS	S DID YO	DU DEC	GREE EARNED AJOR/MINOR	
Other special training or skills (language, machine operations, etc.):						
	applied for employment wathy under contract with an ong for: If YES: Month athy under contract with an ong for: If areas of interest: Full-time Partered able to start? Peligible for employment in ED/First Aid Certified, incompate Level: ENAME/LOC	applied for employment with us? NO If YES: Month and Year	STATE:	STATE: STATE STATE: STATE STATE	STATE:ZIP:	

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS (Exclude those which may disclose your race, color, religion, or national origin.)

EMPLOYMENT HISTORY		Please give accurate, comp record. Start with present or n	lete full-time and part-time employment	
Company Name		Telephone	ioct rossitt employor.	
• •		()		
Address		Employed (State Month and Year)		
		From:	To:	
Name of Supervisor		Weekly Pay		
		Start:	Last:	
State job title and describe your work		Reason for leaving		
Company Name		Telephone		
		()		
Address		Employed (State Month and Year)		
		From:	To:	
Name of Supervisor		Weekly Pay		
		Start: Last:		
State job title and describe your work		Reason for leaving		
Company Name		Telephone		
Company Hamo				
Address		Employed (State Month	and Year)	
		From:	To:	
Name of Supervisor		Weekly Pay	10.	
Traine of Supervisor		Start:	Last:	
State job title and describe your work		Reason for leaving		
		_		
Company Name		Telephone		
Company Name		()		
Address		Employed (State Month	and Voor)	
, add ood		From:		
Name of Supervisor		Weekly Pay	To:	
Name of Supervisor		Start:	Last:	
State job title and describe your work		Reason for leaving	Lust.	
otato job title and docombe your work		rtodoon for loaving		
	Do not contac	t:		
We would like to contact employers listed above unless	Reason:			
you indicate those you do not want us to contact.	Do not contact: Reason:			
you maloule indee you do not main do to comucin	Do not contact:			
	Reasor	า:		
Please provide names and telephone numbers of at le	east three re	ferences and where	they may be reached.	
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2				
3				

	nviction of a crime or arrest is not an automatic bar to employment. The District will consider the release of the offense, and the relationship between the offense and the position for which you are apply		he offense, the
1.	Have you ever been investigated for alleged misconduct in the course of any employment?	☐ Yes	□No
2.	Have you ever resigned, been disciplined, or dismissed from any teaching, other school position, or any other position (paid or unpaid) involving children, in part, for alleged immoral conduct* or incompetence**?	☐ Yes	□No
3.	Have you ever had a teaching or teacher aide certificate or license to be employed denied, revoked, or suspended?	☐ Yes	□No
4.	Is disciplinary action of your educationally related certificate or license currently pending in any state?	☐ Yes	□No
5.	Have you ever been investigated for sexual conduct, abuse, or neglect that resulted in any legal action up to and including conviction, guilty adjudication for violating a civil law, or a local ordinance?	☐ Yes	□ No
6.	Have you ever been convicted of any felony or misdemeanor criminal offense?	☐ Yes	□No
7.	Have you ever paid a civil forfeiture or fine for a non-traffic related offense (including municipal court violations)?	☐ Yes	□ No
8.	Is any criminal charge pending against you in any state?	☐ Yes	□No
* "	Immoral Conduct" means conduct or behavior that is contrary to commonly accepted moral or ethical stanthe health, safety, welfare, or education of any child.	dards and	that endangers
** "	Incompetence" means substantial, prolonged patterns of inadequate performance of duties or the lack of or fitness to discharge required duties, affecting the health, welfare, safety, or education of pupils or child		al qualifications,
	any YES response, provide a detailed written explanation on this or other sheet of paper.		
Ca	n you perform, with or without accommodation, all the duties of the position you seek?		
	☐ With Accommodation ☐ Without Accommodation		
If a	ccommodation is needed, briefly describe what is needed:		
	RELEASE		
firn inq	uthorize the School District of Pittsville to investigate my personal employment history and authorize any n, corporation, or government agency to give the School District of Pittsville any information they may uiries may include and not be limited by enumeration to the quality and quantity of my work, work hist alifications, and/or records or convictions.	have regar	ding me. Such
of I the my the	consideration of the School District of Pittsville's review of this application, I release from all liability or legal Pittsville and every person seeking or providing information, whether oral or written. A photocopy of this representation original, and may be relied upon by all persons providing information. I give this waiver, release, an self, my heirs, assigns and successors in interest forever. I give this waiver, release, and covenant not information obtained may be such as to disqualify me for employment. I understand that such infidentiality and will not request copies of such information.	release sha nd covenan t to sue un	all be as valid as at not to sue for derstanding that
und	signature below certifies that all information on this application is true, complete, and correct to the derstand that any false or misleading statements made by me, or material omissions of information requerents for rejection of my application or, if employed, my immediate dismissal.		•
	ceptance, retention, or review of this application for employment by the District does not guarantee that a position.	an applicar	nt will be offered
	Signature of Applicant Date		_

CRIMINAL BACKGROUND INVESTIGATION

All individuals recommended for employment with the School District of Pittsville must complete a criminal background check prior to hire. The following information is required of all prospective employees in order to process the data request:

Name (Last)	(Fi	est)	(Middle)
Sex: Race	Date of Birth:	Social Security Nur	nber:
Other names by	which you have been known:		
	renced information shall be kept t or personnel file if hired.	in a confidential file a	and is not part of your application
	Authorization a	and release statement	
informed as to investigate my	my character and background,	I hereby authorize th	Pittsville and desiring them to be he School District of Pittsville to s whomsoever from any liability
Signature: _		D	ate:
	MENT: Expecting Excellence and Int	egrity from all, developi	ing Innovative students, strengthened

VISION: Expecting Excellence and Innovation, Honoring Legacy and Embracing Partnerships.



SCHOOL DISTRICT OF PITTSVILLE 5459 Elementary Avenue, Suite 2 Pittsville, WI 54466 715-884-6694