Application for Employment

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. Phoenix School is an equal opportunity employer.

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| Position(s) applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name (Last, First, Middle): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mailing Address: | City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Message Phone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Best time to call: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Type of employment desired: |  Full-Time |  Part-Time |  Temporary |  Seasonal |  Internship |

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| --- | --- | --- |
|   | Yes | No |
| Have you submitted an application here before? If yes, please give date(s): |  |  |
| Are you legally eligible for employment in this country? |  |  |
| Will you relocate if the job requires it? |  |  |
| Will you travel if the job requires it?: |  |  |
| Are you able to meet the attendant requirements of the position?: |  |  |

Educational Background

Please list the last three schools attended, starting with the most recent.

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| --- | --- | --- | --- |
| School | School City/State | Degree/Diploma | Major/Minor |
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Skills and Qualifications

Summarize any special training, skills, licenses, and/or certificates that may qualify you as being able to perform job related functions in the position for which you are applying.

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Employment History

Please provide the following information for your past and current employers, assignments, or volunteer activities, starting with the most recent (use additional sheets if necessary).

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| --- | --- |
| Employer: | Job Title: |
| Employer address: | Employer phone/email: |
| Supervisor’s name & title: | Employment stat and end dates (mm/yyyy): |
| Description of work performed and job responsibilities:  |
| May we contact this employer: Yes No Later  |

|  |  |
| --- | --- |
| Employer: | Job Title: |
| Employer address: | Employer phone/email: |
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| May we contact this employer: Yes No Later  |

|  |  |
| --- | --- |
| Employer: | Job Title: |
| Employer address: | Employer phone/email: |
| Supervisor’s name & title: | Employment start and end dates (mm/yyyy): |
| Description of work performed and job responsibilities:  |
| May we contact this employer: Yes No Later  |

References

List name and phone number and/or email address of three business/work references who are not related to you have are not pervious supervisors. If not applicable, list three school or personal references who are not related to you.

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| --- | --- | --- |
| Name | Phone or Email | Years Known |
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Additional Information

List special accomplishments, publications, awards, professional membership, etc.

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| --- | --- | --- |
| Background Information | Yes | No |
| Are you related to anyone who works for Phoenix Charter School or Phoenix School of Roseburg? *If yes, please list name and relationship:* |  |  |
| Are you a Veteran as defined under Oregon Law (ORS 408.225[e])? *If you answer yes to this question your service record should be reflected in the employment history section of your application. You must also attach a copy of your DD214/DD215 or a letter from the US Department of Veteran Affairs indicating you receive a non-service-connected pension to your application. Please see http://www.oregon.gov/jobs/pages/index.aspx or call 1-800-692-966 for more information.* |  |  |
| Are you a Disabled Veteran as defined under Oregon Law (ORS 408.225[e])? *If you answer yes to this question your service record should be reflected in the employment history section of your application. You must also attach a copy of your DD214/DD215; and a copy of your veteran’s disability preference letter to your application. Please see http://www.oregon.gov/jobs/pages/index.aspx or call 1-800-692-966 for more information.* |  |  |
| Please complete the following:  | Yes | No |
| Have you ever had a professional certification revoked or suspended? |  |  |
| Have you ever had a professional license revoked or suspended? |  |  |
| Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from the employment of another school district? |  |  |
| Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from another employer? |  |  |
| Have you ever left any education or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review, or investigation of alleged misconduct? |  |  |
| Have you ever left educational or school-related employment when you had reason to believe an investigation for misconduct was underway or imminent? |  |  |
| Are you currently the subject of an inquiry, review, or investigation for alleged misconduct or alleged violation of professional standards of conduct by either an employer or a licensure agency? |  |  |
| Have you ever been placed on leave by your employer for any alleged misconduct? |  |  |
| Have you ever had an adverse action taken on a professional certificate, license, or charter school registration? |  |  |
| Have you ever been placed on probationary status for alleged misconduct while holding a professional license, certificate, charter school registration, or credential?  |  |  |
| Have you ever been denied any professional license for which you applied or granted a professional license on a conditional or probationary bases for any alleged misconduct?  |  |  |
| Have you ever surrendered a professional license of any kind before its expiration?  |  |  |
| Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?  |  |  |
| If you answered yes to any of the preceding questions, please explain here:  |

Phoenix Charter School & Phoenix School of Roseburg does not discriminate on the basis of race, color, national origin, age, sex, or disability, in admission or access to, or treatment or employment in its programs and activities. Any person having inquiries concerning the school’s compliance with the regulations implementing Title VI of the Civil Rights Act of 1964 (Title VI), Section 504 of the Rehabilitation Act of 1973 (Section 504), or Title II of the Americans with Disabilities Act of 1990 (ADA), may contact the Executive Director or Human Resources.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer’s service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I also understand that if I am hired, I will be required to provide:

* Proof of identity and legal work authorization.
* A valid license for the assignment offered, if applicable.
* Completion of fingerprinting and drug testing (arrangements to be provided by Phoenix Charter School or Phoenix School of Roseburg).
* Previous members of Oregon Public Retirement System (PERS) must clarify their status with PERS.

In the event of your selection, the information given on this application will become part of your personnel record.

I affirm I have read, understand, and agree to the terms state above and seek employment under these conditions.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_