



SALEM COMMUNITY SCHOOLS

SMALL SCHOOLS. BIG OPPORTUNITIES.

500 N. Harrison Street, Salem, IN 47167

Phone 812-883-4437 Fax 812-883-1031

www.salemschools.com

APPLICATION FOR EMPLOYMENT

Professional Positions

Name: _____ Date: _____
Last First Middle

Address _____
Street, Box #, Apartment # City State Zip

Phone #: _____ Work Phone #: _____ Email: _____

Position for which you are applying: _____

Have you worked for Salem Community Schools in the past: _____ If so, When, Where and Why did you leave? _____

Describe your Qualifications for this position: _____

List any Certificates, Licenses or Endorsements related to the position: _____

What is your current employment status? _____

DEGREE INFORMATION:

Bachelors: _____
Name of College Location Major Date

Masters: _____
Name of College Location Major Date

Doctorate: _____
Name of College Location Major Date

If your resume contains any of the following information, you do not need to respond to the following questions:

REFERENCES:

Name: _____ email: _____ Phone: _____

School/Business: _____

Name: _____ email: _____ Phone: _____

School/Business: _____

Name: _____ email: _____ Phone: _____

School/Business: _____

Name: _____ email: _____ Phone: _____

School/Business: _____

Name: _____ email: _____ Phone: _____

School/Business: _____

EMPLOYMENT HISTORY (Start with Current Position):

Employer: _____ Position: _____ From: _____ To: _____

Employer: _____ Position: _____ From: _____ To: _____

Employer: _____ Position: _____ From: _____ To: _____

Employer: _____ Position: _____ From: _____ To: _____

Employer: _____ Position: _____ From: _____ To: _____

Specialized Training: _____

Use a separate sheet if necessary:

Why do you want to work for Salem Community Schools? _____

What is your vision of an ideal school? _____

What are characteristics of a great teacher? _____

Waiver
Public Law 93-380
“Family Education Rights and Privacy Act of 1974”

I, _____ being aware of the provisions of Public Law 93-380, “Family Education Rights and Privacy Act of 1974”, hereby sign and provide a waiver of the above law’s provisions.

Specifically, I hereby grant authorization to Salem Community Schools to:

1. Request any and all materials and information pertaining to my employment from any of my present or former employers, supervisors or co-workers in any bona fide school district.
2. Request credentials from all educational institutions I have attended.
3. To conduct work history, credit history, personal reference or background check to determine my acceptability for employment.

I hereby further authorize:

1. Any bona fide school district to release any and all information (written or verbal) pertaining to my employment in that school district to the Office of Superintendent, Salem Community Schools.
2. Any or all educational institutions I have attended to release my placement credentials, on request, to the Office of Superintendent, Salem Community Schools.
3. Salem Community Schools to complete a criminal check.

Signature of Applicant _____ Date _____

Salem Community Schools does not discriminate in any practice in the operation of the school system upon the basis of sex, race, color, age, religion, creed, national origin, handicap or veteran’s status. Salem Community Schools will not permit discriminatory practices to be used by anyone in the schools system upon the bases of sex, race, color, age, religion, creed, national origin, handicap, or veteran’s status.

All new employees are expected to complete an induction process and acquire the necessary technology skills, as identified by Salem Community Schools.

Applications remain on file for one year from the date of application. Renewal of this application is the responsibility of the applicant.

COMPLETE APPLICATION FILE INCLUDES:

1. Letter of Application
2. Completed Application
3. Copies of License/Certificates
4. Copies of Transcripts
(If hired, a copy of all official transcripts will be required)
5. Resume