

**TRI-CENTER COMMUNITY SCHOOL DISTRICT  
EMPLOYMENT APPLICATION**

33980 310<sup>th</sup> Street  
Neola, Iowa 51559  
Phone: 712-485-2257 FAX: 712-485-2411

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or disability.



An Equal Opportunity/Affirmative Action Employer

**TROJANS**

(Please print or type)

Date: \_\_\_\_\_

NAME: \_\_\_\_\_  
Last First Middle

ADDRESS: \_\_\_\_\_  
Number and Street

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME TELEPHONE: \_\_\_\_\_ BUSINESS TELEPHONE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

Are you legally able to work in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

**POSITION DESIRED**

First choice \_\_\_\_\_

Second choice \_\_\_\_\_

Third choice \_\_\_\_\_

Total years experience: \_\_\_\_\_

Have you filed an application with our school before? \_\_\_\_\_

If yes, give date \_\_\_\_\_ and position applied for \_\_\_\_\_

This application will remain on file for one year from the date of application only; it must be renewed if further consideration for a position is desired.

**It is the policy of the Tri-Center Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment) marital status (for programs), sexual orientation, gender identity, and socioeconomic status(for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact the district's Equity Coordinator, Chad Harder, Secondary Principal, Tri-Center Community Schools, 33980 310th Street, Neola, IA 51559, (712)485-2257, charder@tctrojans.org.**

**EDUCATION**

<b>School</b>	<b>Name</b>	<b>Location City, State</b>	<b>Dates Attended</b>	<b>Diploma or Degree</b>
High School	_____	_____	_____	_____
Colleges/Universities	_____	_____	_____	_____
Business/Trade	_____	_____	_____	_____
Other	_____	_____	_____	_____

\*If you did not receive a degree, indicate the number of college hours attained: \_\_\_\_\_ Please attach your college transcript with this application IF it has not been sent to us.

**WORK EXPERIENCE**

List most recent experience first. Use a separate sheet if necessary. Indicate any skills, experience or training (military, on the job, or other) you have received which will assist the District in placing you.

<b>From</b>	<b>To</b>	<b>Number of Years</b>	<b>Name/Address of Employer</b>	<b>Immediate Supervisor</b>	<b>Type of Job</b>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

**REFERENCES**

<b>Full name of reference</b>	<b>Position</b>	<b>City / State</b>	<b>Office Phone</b>	<b>Home Phone</b>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If you have a relative who works for this District or who serves as a member of a Board of Education, please give the name and address and describe your relationship: \_\_\_\_\_

- CERTIFIED ELEMENTARY / MIDDLE / SECONDARY CANDIDATES / SUBSTITUTE TEACHERS AND TEACHER AIDES**

List endorsements to your state certificate below      Certified Teaching Fields      Sem. Hrs.

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Area of specialization: \_\_\_\_\_  
 (Must have a least 18 semester hours)

Type of certificate held: \_\_\_\_\_ Professional    \_\_\_\_\_ Provisional    \_\_\_\_\_ None

If certified in another state, indicate which state and type of certificate held: \_\_\_\_\_

If you do not have a valid state certificate, what do you lack? \_\_\_\_\_

Grade or subject in which you did student teaching: \_\_\_\_\_

Where did you do your student teaching? \_\_\_\_\_

- FOR CLASSIFIED STAFF APPLICANTS:**

Position for which applying:

\_\_\_\_\_ Custodian                      \_\_\_\_\_ Teacher Aide                      \_\_\_\_\_ Secretary  
 \_\_\_\_\_ Cook                              \_\_\_\_\_ Bus Driver                      \_\_\_\_\_ Other (specify)

- FOR SECRETARIAL/CLERICAL APPLICANTS AND SUBSTITUTES:**

Do you keyboard/type?    \_\_\_\_\_ Yes    \_\_\_\_\_ No                      Number of words per minute \_\_\_\_\_

Please list below any additional office machine/computer software with which you have had experience.

TYPE MACHINE/SOFTWARE	NUMBER OF YEARS EXPERIENCE
_____	_____
_____	_____
_____	_____

- FOR ALL APPLICANTS**

List any additional information you think would be helpful concerning your knowledge, skills and experience related to the job for which you are applying.

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Briefly, state what you feel you can contribute as an employee for the TRI-CENTER COMMUNITY SCHOOL DISTRICT in the position for which you are applying.

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## STATEMENT

The Tri-Center Community School District strives to select qualified applicants who will serve as positive role models for students.

Moral turpitude is an act of baseness, vileness, or depravity in the private and social duties which a person owes another member of society or society in general and which is contrary to the accepted rule of right and duty between persons, including, but not limited to theft, attempted theft, murder, rape, swindling and indecency with a minor.

Have you ever been convicted of a felony or any offense involving moral turpitude? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, please explain \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a felony or any offense involving moral turpitude and received probation?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain \_\_\_\_\_

\_\_\_\_\_

Has any court ever received a plea of guilty or a plea of *nolo contendere* from you for any offense involving moral turpitude, deferred proceedings without entering a finding of guilty and placed you on probation?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain \_\_\_\_\_

\_\_\_\_\_

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Conviction of a crime is not an automatic bar to employment. The Tri-Center Community School District will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

Why do you desire to leave your present position or why did you leave your last position? \_\_\_\_\_

\_\_\_\_\_

Have you ever been involuntarily terminated or asked to resign from the employment of another school district? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please give the name of the district, the date and the reason for the termination of request for resignation. \_\_\_\_\_

\_\_\_\_\_

Are you able to perform the essential job duties required of the position for which you are making an application, with or without reasonable accommodation? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, please explain \_\_\_\_\_

\_\_\_\_\_

## **AGREEMENT**

I hereby certify that the previous 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. Furthermore, it is understood that this application and records become the property of the District, which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the Tri-Center Community School District now in force and effect or as they may change during my employment, if I am employed by the District.

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Signature of Applicant

I hereby authorize the District to conduct work history, personal reference or police record inquires to determine my acceptability for employment and release those supplying any information from all liability.

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Signature of Applicant

## **BUS DRIVER APPLICANTS ONLY**

I understand that any offer of employment with the Tri-Center Community School District is contingent upon my passing any required drug and alcohol test.

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Signature of Applicant



# STATE OF IOWA Criminal History Record Check Request Form



DCI Account Number: \_\_\_\_\_  
(if applicable)

**To: Iowa Division of Criminal Investigation  
Support Operations Bureau, 1<sup>st</sup> Floor  
215 E. 7<sup>th</sup> Street  
Des Moines, Iowa 50319  
(515) 725-6066  
(515) 725-6080 Fax**

**From:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_

I am requesting an Iowa Criminal History Record Check on:

<b>Last Name</b> (mandatory)	<b>First Name</b> (mandatory)	<b>Middle Name</b> (recommended)
<b>Date of Birth</b> (mandatory)	<b>Gender</b> (mandatory)	<b>Social Security Number</b> (recommended)
	<input type="checkbox"/> Male <input type="checkbox"/> Female	

***Waiver Information:*** Without a signed waiver from the subject of the request, a complete criminal history record may not be releasable, per Code of Iowa, Chapter 692.2. For complete criminal history record information, as allowed by law, always obtain a waiver signature from the subject of the request.

***Waiver Release:*** I hereby give permission for the above requesting official to conduct an Iowa criminal history record check with the Division of Criminal Investigation (DCI). Any criminal history data concerning me that is maintained by the DCI may be released as allowed by law.

***Waiver Signature:*** \_\_\_\_\_

<b><u>Iowa Criminal History Record Check Results</u></b>	(DCI use only)
As of _____, a search of the provided name and date of birth revealed:	
<input type="checkbox"/> No Iowa Criminal History Record found with DCI	
<input type="checkbox"/> Iowa Criminal History Record attached, DCI # _____	
DCI initials _____	

### **Waiver Information:**

Iowa law does ***not*** require a waiver. However, without a signed waiver from the subject of the request any arrest over 18 months old, ***without*** a final disposition, cannot be released to a non-law enforcement agency.

Deferred judgments where DCI has received notice of successful completion of probation also cannot be released to non-law enforcement agencies without a signed waiver from the subject of the request.

If the “No Iowa Criminal History Record found with DCI” box is checked, it could mean that the information on file is not releasable per Iowa law without a waiver.

### **General Information:**

The information requested is based on ***name*** and ***exact date of birth only***. Without fingerprints, a ***positive*** identification cannot be assured. If a person disputes the accuracy of information maintained by the Department, they may challenge the information by writing to the address on the front of this form or personally appearing at DCI headquarters during normal business hours.

The records maintained by the Iowa Department of Public Safety are based upon reports from other criminal justice agencies and therefore, the Department cannot guarantee the completeness of the information provided.

The criminal history record check is of the Iowa Central Repository (DCI) ***only***. The DCI files do not include other states’ records, FBI records, or subjects convicted in federal court within Iowa.

In Iowa, a ***deferred judgment*** ***is not*** considered a conviction once the defendant has been discharged after successfully completing probation. However, it should be noted that a deferred judgment may still be considered as an offense when considering charges for certain specified multiple offense crimes, i.e. second offense OWI. If a disposition reflects that a deferred judgment was given, you may want to inquire of the individual his or her current status.

A ***deferred sentence*** ***is*** a conviction. The judge simply withholds implementing a sentence for a certain probationary period. If probation is successful, the sentence is not carried out.

Any questions in reference to Iowa criminal history records can be answered by writing to the address on the front of this form or calling (515) 725-6066 between 8:00 a.m. and 4:30 p.m., Monday - Friday.

**REMINDER** - (1) Send in a separate Request Form for each last name, (2) a fee is required for each last name submitted, (3) a completed billing form must be submitted with all request(s).

Iowa law requires employers to pay the fee for potential employees’ record checks.