

Rising Sun ~ Ohio County Community Schools 110 Henrietta Street • Rising Sun, Indiana 47040

110 HENRIETTA STREET * RISING SUN, INDIANA 47040 PHONE (812) 438-2655 * FAX (812) 438-4636 WWW.RISINGSUNSCHOOLS.COM

	Арг	plicant Information				
Full Name:			Date:			
Last	First	M.I.				
Address:						
Street Address		Apartment/Unit #				
City		State		Zip Code		
Phone: _()		_E-mail Address:				
Date Available for Employm	ent:					
Date Available for Employm						
Position(s) Applied for:			YES	NO		
C '1 1		l	TES			
Can you provide documentati						
Have you ever been convicted	d of a felony?	YES NO				
If yes, please explain:						
Are you presently under inve	stigation for a crim	e? YES	NO			
If yes, please explain:						
	Perso	onal Data (optional)				
List professional, honorary, and service organization memberships (include offices held or awards earned).						
Indicate applicable coaching,	volunteer, or comm	munity involvement experie	ence.			

		Education		
High School:		Address: _		
College:		Address: _		
From:	TO:			
Other:		Address: _		
From:	TO:			
Please list any certification		obtained:		
Please list up to three proj	fessional and two	personal references.		
Full Name:		Relations	ship:	
School/Organization:			Phone _(
Address:			Email:	
Full Name:		Relations	ship:	
School/Organization:			Phone _(
Address:			Email:	
Full Name:		Relations	ship:	
School/Organization:			Phone _()
Address:			Email:	
Full Name:		Relations	ship:	
School/Organization:)
Address:				
Full Name:		Relations	ship:	
School/Organization:			Phone _(
Address:			Email:	

	Military Service	
Branch:	From:	TO:
Rank at Discharge:	Type of Discharge:	
If other than honorable, please expla	iin:	
	Disclaimer and Signature	
(I.C. 22-9-1), I.C. 20-8.1-2, Title VI and Education Amendments, Section 504 of Family Medical Leave Act of 1993, and Community School Corporation further religion, sex, national origin, age, disab	County Community School Corporation to comply of VII of the Civil Rights Act of 1964, the Equal Pay of the Rehabilitation Act of 1973, the Americans with a other applicable State and Federal Statutes. The cassures that it will not discriminate against any publity, or limited English proficiency, nor will anyon in admission or access o, or treatment or employed the operation of its facilities.	y Act of 1973, Title IX (1972) h Disabilities Act of 1992, the Rising Sun-Ohio County person on the basis of race, color, one be denied the benefits of, or
remove any vestige of discrimination in	nmitment and requirement of the law, the School B employment, assignment, and promotion of staff, lents; in location and use of facilities; and in educa	in educational programs,
Inquiries regarding compliance with Till proficiency should be directed to the Su	itle IX, Section 504, or the Americans with Disabil uperintendent of the Rising Sun-Ohio County Com- e telephone number is (812) 438-2655 or the Offic	ities Act, or limited English munity School Corporation, 110
Legal Reference: IC 20-4-10.1-1	et seq.; IC 20-5-2-1; IC 20-5-2-2	
I certify that my answers are true and co	complete to the best of my knowledge.	
necessary in arriving at an employment	mmunity School Corporation to make such investi t decision. I hereby release employers, schools, or with my application. I understand that the use of m	persons from all liability in
If this application leads to employment, may result in my release. I understand, Ohio County Community School Corpor	I understand that false or misleading information also, that I am required to abide by all rules and bration.	in my application or interview regulations of the Rising Sun-
Signature:	De	nte:

Re-submit application for each school year or notify us annually that you wish to keep the file active.

Signature: _