

Linton-Stockton School Corporation
801 First Street NE
Linton, IN 47441
(812) 847-6020

EXTRA-CURRICULAR VOLUNTEER APPLICATION

Date: _____

DOB: _____
(For limited background checks only)

Name: _____
(Legal, Last) (Legal, First) (Legal, Middle)

Any other name or names by which you have been known: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone # (home) _____ Phone# (cell) _____

Email Address: _____

Please indicate the position(s) for which you wish to apply:

Experience relevant to the position for which you are applying:

This application will be kept on file for one (1) year and will be considered for any openings which may occur during that time.

Linton-Stockton School Corporation is an equal opportunity employer and will not discriminate against anyone on the basis of sex, age, race, color, natural origin, or handicap.

REQUEST FOR BACKGROUND INFORMATION
(For limited criminal background check only)

Dear Application:

Jobs with the Linton-Stockton School Corporation ("School District") involve contact with our student population. We ask that you complete the questions below to help us evaluate your suitability to work with these students. All applicants are expected to provide us with this information; you are not being singled out for closer inspection. This insert is part of the application itself and any misrepresentation or omission of fact may be grounds for disqualification from further consideration or for termination from employment (regardless of when the misrepresentation or omission is discovered).

The conviction of a crime that has not been expunged by a court or any affirmative answer provided by you on this insert is not an automatic bar to employment. The "School district" will consider the nature of any conviction that has not been expunged by a court or alleged conduct underlying the affirmative response, the date of the alleged conduct in question, your intervening conduct, and the relationship between the offense or alleged conduct underlying the affirmative response and the position for which you are applying.

1. If you are now working, is your conduct as an employee or the quality of your work the focus of any investigation by your current employer? YES ___ NO ___. If yes, explain the circumstances on a separate sheet and attach it to this application.
2. Have you ever resigned from a job after being disciplined by your employer or after being offered the opportunity to resign rather than be terminated? YES ___ NO ___. If yes, explain the circumstances on a separate sheet and attach it to this application.
3. Have you ever been investigated for, charged with, or plead guilty or "no contest" to any crime that has not been expunged by a court involving the sexual abuse of any person or indecency with a minor? YES ___ NO ___. If yes, explain the circumstances on a separate sheet and attach it to this application.
4. Have you ever been arrested for or convicted of a crime, other than a minor traffic offense, that has not been expunged by a court? YES ___ NO ___. If yes, explain the circumstances on a separate sheet and attach it to this application.

AUTHORIZATION AND RELEASE

I authorize the "School District" to check my employment history, including (without limitation) reference checks, and to seek the release of investigatory information, including a "limited criminal history," possessed by any private or public employer or any local, state, or federal agency. I authorize these private or public employers or local, state, or federal agencies to provide the "School District" any information they may release concerning the matters described herein, and I will cooperate to the extent necessary to obtain the release of this information.

In connection with any request for or provision of such information, I expressly waive any claims or causes of action (including without limitation, defamation, infliction of emotional distress, invasion of privacy, or interference with contractual relations) that I might otherwise have against the "School District," its officials, employees, trustees, or agents, or against any provider of such information.

I have read this authorization and release of all claims, and I expressly agree to the terms set out herein. In addition, the information provided in this application and attachments are true and correct to the best of my knowledge.

Signature

Date

Please print your name