JENNINGS COUNTY SCHOOL CORPORATION MAIN STREET NORTH VERNON, IN 47265 (812) 346-4483

VOLUNTEER APP	LICATION	Date of Application	
	lered for all positions wi naterial or veteran status handicap.	_	_
Name of child			
School Part A			
classroom*technology*supervision If you checked one o	gnments(s) for which yo coach*of clubslusfield tripsro f the following assignment required to complete Part (Maiden Name)	fice*library nch roomclean- om parent dance ents: classroom, coach, t B of the JCSC Volun	up , office, library, or
Last Name	(Maidell Name)	Thist Name	1V1/1
Address	City	State	Zip Code
Home Phone:	Work Phone:	Cell Phon	e
E-mail	Driver's L	icense #	
Social Security Num	ber	(optional)
Emergency Contact:	Name	Phone	
be sufficient cause for volunteer program. A offender background	agreed upon that any miser cancellation of this appull volunteers of the JCS check; therefore, they we py of driver's license for heck.	olication and/or separa C are subject to a crim ill be expected to prov	tion from the JCSC inal history/sex vide JCSC with their
Date	Volunte	er's Signature	Date of Birth

Part B

EDUCATION				
			Years	Degree/Date
or				
School	Addre	ess	Attende	ed Hours and/or
cred	lits			
High School				
College*				
Other				
*Transcripts are to be filed	l with complete	ed application	on	
Transcripts are to be inter-	a with complete	ou approun	311	
WORK HISTORY				
Q	1			
Start with your present/	last position			
Employer			Loca	tion
Dates:		Supervisor	••	
Describe the world way				
Describe the work you did:				
uiu.				
Reason for				
leaving:				
Employer			Loca	tion
Dates:		Supervisor	••	
Describe the work you				
did:				

Reason for leaving:		
Employer	Locati	on
Dates:	Supervisor:	
Describe the work you did:		
Reason for leaving:		
REFERENCES		
Please list the names of four person background and qualifications.	ns who know of your personal or	professional
Name and Position	Address	Telephone
Please list any experiences or activi which you are volunteering.	ties that would be related to the a	ssignment(s) for
Experience/Activity	Location/Organization	Date

Briefly state v	what you believe you can contribute as a volunteer for the Jennings County
School Corpo	ration.
Please list tec	hnological and software you can operate and feel confident in using:
Are you legal	ly eligible for employment in the country? Yes \(\square \) No \(\square \)
(Proof of U.S. C	Citizenship or immigration status will be required upon an offer of employmen
be sufficient of volunteer pro- sex offender, provide JCSC	od and agreed upon that any misrepresentation by me in the application will cause for cancellation of this application and/or separation from the JCSC gram. All volunteers of the JCSC are subject to a limited criminal history, and child abuse background check; therefore, they will be expected to with their date of birth, for the purpose of conducting the limited criminal ffender, and child abuse background checks.
Date:	Volunteer's

JENNINGS COUNTY SCHOOL CORPORATION SUPPLEMENT TO EMPLOYMENT APPLICATION

Request for Background Information

Dear Applicant:

Jobs with the Jennings County School Corporation 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 for employment are expected to provide us with this information; you are not being singled out for closer inspection. This separate form is part of the application process itself and any misrepresentation or omission of facts 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 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 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 position for which you are applying.

1.	Are you presently under investigation by any employer because of your conduct
	or the quality of your work? Yes No If so, please explain the
	circumstances on a separate sheet and attach it to this application.
2.	Have you ever resigned from a job as a result of any investigation or discipline by
	an employer? Yes No If yes, please explain the circumstances on a
	separate sheet and attach it to this application.
3.	Have you ever been the subject of an investigation, an arrest, a charge, or a
	conviction involving the physical or sexual abuse of any persons whether an adult
	or a minor? Yes No I If so, please explain the circumstances on a separate
	sheet and attach it to this application.
4.	Have you ever been arrested, charged, and/or convicted for any misdemeanor or
	felony? Yes No If so, please explain the circumstances on a separate sheet
	and attach it to this application.

AUTHORIZATION AND RELEASE

I AUTHORIZE THE Jennings County School Corporation to investigate my employment history and my criminal history, if any. Further, I authorize the Jennings County School Corporation to obtain any information about me maintained in the "child abuse registry" authorized by I.C. 31-6-11-12.1 and an expanded criminal history check. I hereby authorize my previous employer and their agents and employees to release of my employment history records that are requested by the Jennings County School Corporation. Further, I also authorize any local, state, or federal agency to release to the Jennings County School Corporation any expanded criminal history records and child abuse registry records that pertain to me. I agree to

execute all documents required to obtain the release of each such records and pay any and all fees associated with background checks (\$31.50).

Link: JCSC.org; employment; Safe Hiring Solutions

RELEASE OF CLAIMS

I HEREBY EXPRESSLY WAIVE AND RELEASE ALL CLAIMS THAT MAY ARISE OUT OF THE RELEASE OF RECORDS OR HISTORY HEREIN THAT I MAY HAVE AGAINST THE JENNINGS COUNTY SCHOOL CORPORATION, ITS DIRECTORS, OFFICERS, AGENTS, OR EMPLOYEES OR THAT I MAY HAVE AGAINST THE PROVIDER, ITS OFFICERS, AGENTS, OR EMPLOYEES, SUCH RECORDS OR HISTORY.

I HAVE READ THIS AUTHORIZATION AND RELEASE OF CLAIMS, AND I EXPRESSLY AGREE TO THE TERMS SET OUT HEREIN.

Signature Date

Please Print Your Name

Social Security Number

Please Print Your Complete Address

Birthdates (Only for Purposes of Requesting Criminal History Information)