

# Jefferson County Education Service District

295 SE Buff Street  
Madras, OR 97741  
(541)475-2804 FAX (541)475-2827  
District Website: [www.jcesd.k12.or.us](http://www.jcesd.k12.or.us)

## Certified Application

Please complete each question fully and accurately. Incomplete applications may not be considered. Complete shaded area for licensed employment.

### PERSONAL IDENTIFICATION:

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First MI

Mailing address \_\_\_\_\_ Phone: \_\_\_\_\_  
(Street) (City) (State) (Zip code)

Permanent Address \_\_\_\_\_ Phone \_\_\_\_\_  
(Street) (City) (State) (Zip code)

E-mail address \_\_\_\_\_ List other names you are known by: \_\_\_\_\_

If hired, can you provide proof that you are authorized to work in the U.S.?  Yes  No

Please list any Board members or District employees you are related to: \_\_\_\_\_

### TEACHING OR OTHER LICENSED POSITIONS:

Please check position(s) for which you are qualified and will accept if offered.

Teacher: Authorization Level/Grade(s) \_\_\_\_\_

Counselor  Librarian/Media  Social Worker  Administrator  Other: \_\_\_\_\_

### FOR TEACHING, ADMINISTRATIVE & OTHER LICENSED POSITIONS ONLY:

In which area/subjects are you willing to teach? Check whether your qualification is by major, minor or endorsement.

Area/subject \_\_\_\_\_ Major  Minor  Endorsement

Area/subject \_\_\_\_\_ Major  Minor  Endorsement

Area/subject \_\_\_\_\_ Major  Minor  Endorsement

### LICENSE AREAS:

Check type of Oregon license(s) you hold or have applied for: License # \_\_\_\_\_ Date(s) of expiration: \_\_\_\_\_

Early Childhood  Elementary  Special Education  Counselor  ELL  
 Library/Media  Secondary  Psychologist  Administrator  Pro-Tech

### ENDORSEMENTS AND AUTHORIZATION LEVELS:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

If you are not licensed in Oregon, have you applied?  YES  NO If "yes", when do you anticipate receiving the license? \_\_\_\_\_  
Official transcripts are required at the time of hire to verify salary placement for licensed positions.

**EDUCATION AND TRAINING:**

Circle the highest grade or years completed: Formal education : 1 2 3 4 5 6 7 8 9 10 11 12  
 College or other: 1 2 3 4 5 6 7

|                                   | School Name and Location | From | To | Receive diploma | GPA | Major | Minor/Special Courses |
|-----------------------------------|--------------------------|------|----|-----------------|-----|-------|-----------------------|
| High School Or GED                |                          |      |    |                 |     |       |                       |
| College or University (Undergrad) |                          |      |    |                 |     |       |                       |
| Graduate School                   |                          |      |    |                 |     |       |                       |
| Other Education                   |                          |      |    |                 |     |       |                       |

List any special skills, experiences, or relevant organizational affiliations: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Other than English, list languages you speak fluently: \_\_\_\_\_

List languages other than English that you can read and write: \_\_\_\_\_

**EMPLOYMENT RECORD:** Give a complete account of your employment even if you attach a résumé. BEGIN ON THE FIRST LINE WITH YOUR PRESENT OR MOST RECENT POSITION AND WORK BACK. EXPLAIN ALL GAPS IN SERVICE, INCLUDING PART-TIME, VOLUNTEER, AND NO-WORK. ATTACH AN ADDITIONAL SHEET IF NECESSARY. (Do not limit to teaching only; list military experience.)

**PRESENT EMPLOYMENT:**

Are you presently employed?  YES  NO If no, please explain: \_\_\_\_\_

Will you give advance notice to your present employer?  YES  NO

May we contact your present employer for a reference?  YES  NO

**Employment History:**

| Employer | Address | Phone | Position(s) Held | Dates Employed | Reason for Leaving |
|----------|---------|-------|------------------|----------------|--------------------|
|          |         |       |                  |                |                    |
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**REFERENCES:** Please list the contact information for 3 business references (such as supervisors, co-workers, subordinates)

| <u>Name:</u> | <u>Position/Business Relationship:</u> | <u>Organization:</u> | <u>Phone Work and Home:</u> |
|--------------|--|----------------------|-----------------------------|
| _____        | _____                                  | _____                | _____                       |
| _____        | _____                                  | _____                | _____                       |
| _____        | _____                                  | _____                | _____                       |

Do you have a valid OREGON driver's license?     YES     NO  
 Drivers License Number: \_\_\_\_\_    Class: \_\_\_\_\_

**AGREEMENT AND ACKNOWLEDGEMENT:** (Read carefully before signing.) All information provided by me is true and correct to the best of my knowledge. Unsolicited applications remain active for approximately 1 year. If applying for specific openings, I understand I will need to reapply for subsequent openings to be considered for employment. I understand omissions or misrepresentations may result in rejection of my application or, if employed, may result in subsequent dismissal. I hereby authorize any former employer, person, school, firm or corporation listed, including the District, to answer any and all questions related to employment and agree to release from liability and hold all persons harmless for giving any and all truthful information within their knowledge or records. I waive my right of access to any such information. I understand this is a preliminary application and not a contract to employ me.

Furthermore, I understand that this application and all attached documents are official records of the Jefferson County Education Service District and cannot be returned. **(We suggest that you attach only COPIES of any required documents submitted with this application.)**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER** - Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, color, national origin, religion, age, sex, disability, or any other factor prohibited by law or regulation. If you require reasonable accommodation in the application/interview process, please notify a Personnel Services representative at 541-475-2804.

**APPLICATION REQUIREMENTS:**

To ensure your application is complete, please enclose the application requirements listed for the position category:

| TEACHING & OTHER LICENSED POSITIONS   | ADMINISTRATOR   |
|---|---|
| Cover Letter<br>Résumé<br>Copy of Oregon Teaching License<br>Copies of Official Transcripts<br>Copies of Evaluations from Immediate Supervisor for the Past Two Years | Cover Letter<br>Résumé<br>Oregon Administrator/Supt. license<br>3 Letters of Recommendation<br>Copies of Official Transcripts<br>Copies of Evaluations from Immediate Supervisor for the Past Two Years |

**Submit completed to:**

**Tessa Bailey, Executive Assistant**  
**Jefferson County Education Service District**  
**295 S.E. Buff Street**  
**Madras, OR 97741**  
**541.475.0341 or 541.475.2804 FAX:**  
**541-475-2827 E-Mail: tbailey@jcesd.k12.or.us**

## DISCLOSURE

As part of the employment process, Jefferson County Education Service District will obtain a background report, which may include information regarding character, general reputation, history of prior residence, and criminal history background.

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### AFFIRMATIVE ACTION INFORMATION (OPTIONAL)

This information is requested solely to monitor equal employment opportunity under an affirmative action program. To assist in this program, please provide the following information:

- A. Race/Cultural Group:  White  Hispanic  Asian/Pacific Islander  
 African American  Native American/Alaskan Native
- B. Sex:  Female  Male
- C. Date of Birth: \_\_\_\_\_

Discrimination in the Jefferson County Education Service District is prohibited under Title VII of the Civil Rights Act of 1964. Recognizing its legal, as well as social obligation to make equal employment opportunity a reality, the Jefferson County Education Service District hires and promotes without regard to race, color, gender, national origin, religion, age, or mental or physical handicap unrelated to job performance.

## Pre-Employment Background Questions

**This form will be physically separated from your other application materials.**

### PRIOR EVENTS:

The answers to these questions are subject to verification. A "Yes" answer does not automatically disqualify an applicant. Each application will be reviewed individually. If in doubt, please explain your answer. Please check YES or NO for each question.

Have you ever applied for work at this school district before?  Yes  No

If Yes, when: \_\_\_\_\_

Have you previously been an employee of this district?  Yes  No

If Yes, when: \_\_\_\_\_

Have you ever been discharged for cause?  Yes  No

Have you ever resigned your employment under threat of termination?  Yes  No

Have you EVER been convicted of a sex-related crime?  Yes  No

If "yes", please specify the state. \_\_\_\_\_

Have you EVER been convicted of a crime involving violence or threat of violence?  Yes  No

If "yes", please specify the state. \_\_\_\_\_

Have you EVER been convicted of a crime involving criminal activity in drugs or alcoholic beverages?  Yes  No

If "yes", please specify the state. \_\_\_\_\_

Have you ever been convicted of any law violation, except minor traffic violations?  Yes  No

If "yes", please explain: \_\_\_\_\_

Have you been arrested within the last three years for a crime for which there has not yet been an acquittal or dismissal?  Yes  No

Have you ever left any educational or school-related employment, voluntarily, or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct or alleged violation of professional standards of conduct, or when you had reason to believe such investigation was imminent?  Yes  No

Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct?  Yes  No

Have you ever had any civil judgment or other judgment entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking, or other threatening behavior towards other persons?  Yes  No

If "yes", please explain: \_\_\_\_\_

Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?  Yes  No

Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?  Yes  No

Have you ever surrendered a professional license of any kind before its expiration?  Yes  No

**If you are applying for a position requiring a professional license** (teacher, administrator, district office support staff, counselor, librarian, etc.):

Have you ever had a professional certificate/license or other employment certificate/license revoked or suspended, or have you ever been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct?  Yes  No

Have you ever failed to complete a contract for educational services in any educational or school-related position, or for any alleged misconduct or alleged violation of professional standards of conduct been placed on leave by your employer or left such employment prior to the end of the contract term?  Yes  No

Have you ever resigned a teaching position before the end of contract?  Yes  No

If "yes", please explain: \_\_\_\_\_

Are you under investigation for a revocation or suspension of a professional license/certificate?  Yes  No

Have you ever had a hearing before a licensing board?  Yes  No

**Explanations for all "Yes" answers given above: A separate sheet may be attached if needed.**

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I understand that omission on this form may prevent my application from being evaluated or considered for a position in your school district. I authorize Jefferson County School Education Service District to obtain information about my criminal records. I authorize all governmental agencies to provide information about my criminal records to your school district. I verify that all information on this form, and on my application, is true and complete. I understand that any misrepresentation, falsification, or omission on this form or on other documents submitted to your school district will be sufficient cause for my application not to be considered by the district, or for discharge if I have been employed.

\_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

**Jefferson County Education Service District - CRIMINAL HISTORY RECORDS CHECK/FINGERPRINTING**

I understand that criminal history records checks and fingerprinting are required by law (ORS 326.603, ORS181.539,) and by Board policy. Notification by the Superintendent of Public Instruction or designee or by the State Board of Education that an individual has been convicted or has made a false statement as to conviction of any crimes will terminate employment or contract status immediately. The \$62.00 fee associated with criminal history record checks and fingerprinting, shall be the responsibility of the individual at the time of hire.

I understand that an individual so terminated may appeal the action taken by the district as a result of such checks in accordance with procedures established by law (ORS 183.413.) or by Board policy. The district will provide applicable appeal rights.

Should I refuse to consent to criminal history records checks or refuse to be fingerprinted, the superintendent shall terminate me from employment or contract status immediately. I understand that individuals who have successfully completed an Oregon, FBI and ODE criminal history records check by a previous school district and have not since resided outside Oregon may be exempt from this requirement. It is the responsibility of the individual to inform the district of the existence of such records.

Please Print Name \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_