

Employment Application

APPLICANT INFORMATION

Full Name: _____ Date: _____
Last First M.I.

Address: _____ Apt/Unit #
Street Address

Phone: _____ Email: _____
City State ZIP Code

Position applied for: _____

Years of relevant experience: _____

Are you a citizen of the United States? ☐ Yes ☐ No

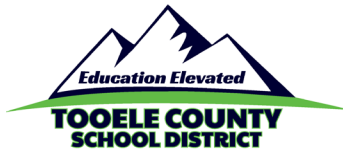
If no, are you authorized to work in the U.S.? ☐ Yes ☐ No

Have you ever worked for TCSD? ☐ Yes ☐ No If yes, when? _____

Have you ever been convicted of a felony? ☐ Yes ☐ No

Have you ever been discharged from a former position? ☐ Yes ☐ No

Have you ever been suspended or terminated? ☐ Yes ☐ No If yes, explain below.



EDUCATION

High School: _____ Address: _____
From: _____ To: _____ Did you graduate? _____ Diploma: _____

College: _____ Address: _____
From: _____ To: _____ Did you graduate? _____ Degree: _____

Other: _____ Address: _____
From: _____ To: _____ Did you graduate? _____ Degree: _____

REFERENCES

Please list three professional references.

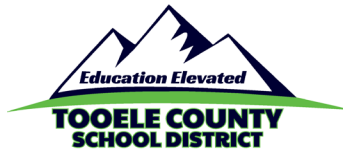
Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

PREVIOUS EMPLOYMENT

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____
Reason for leaving: _____



Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____
Reason for leaving: _____

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____
Reason for leaving: _____

SIGNATURE AGREEMENT AND RELEASE FOR BACKGROUND AND REFERENCE CHECKS

I certify that my answers are true and complete to the best of my knowledge.

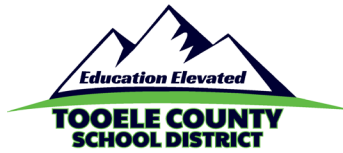
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand that this application and records become the property of the District. I authorize Tooele County School District to inquire with former employers and/or references and to obtain any and all information regarding my job-related background and qualifications and information regarding any employment action taken or discipline imposed for the physical abuse or sexual abuse of a child or student, as required by Utah Code 53A-6-401.

I release and waive Tooele County School District, my former employers and all references from any and all liability in obtaining such information. I also recognize that in accordance with Utah State Law, the District may conduct a criminal background check and I hereby waive my right to further written notice of such. I understand that if employed, the employment is conditional pending completion of all required documents and the outcome of history and background check investigations. If I am presently charged or under indictment for a criminal offense, plea in abeyance, upon a finding or plea of guilty I shall provide that information to Tooele County School District.

I further agree to observe all the rules, regulations and policies of the District.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application. Principle Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing



your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

I acknowledge that I have carefully read and understand this authorization to conduct a background and reference check. I am knowingly and voluntarily signing this authorization with the understanding that doing so affects my legal rights.

Signature: _____ Date: _____