NON-CERTIFIED STAFF (NOT TEACHER) / NON-CERTIFIED SUBSTITUTE APPLICATION PROCESS

ITEMS YOU NEED TO APPLY FOR NON-CERTIFIED STAFF AND/OR NON-CERTIFIED SUBSTITUTE: Complete MSD Non-Certified Staff / Non-Certified Substitute Application Official college/university transcripts showing 60 credit hours (For Instructional Assistant or Permit Substitute Teacher) Expanded Background is required by Indiana law for all new school employees. MSD of Steuben County has hired Safe Hiring Solutions to run our backgrounds. Safe Hiring Solutions website is available at: https://sites.google.com/a/msdsc.us/substitute-instructions/home Step 3. Safe Hiring requires the applicant to use a credit card for the approximately \$40 charge (cost varies depending on states/counties/previous licensure). Copy of your Indiana Substitute Teacher Permit (For Substitute Teacher only). If you need to apply for a permit, the application is online at http://www.doe.in.gov/licensing/substitute-plans. The state requires the applicant to use a credit card for the application fee. BEFORE YOU APPLY FOR YOUR PERMIT YOU WILL NEED TO HAVE ON FILE YOUR APPLICATION AND EXTENSIVE BACKGROUND OR YOUR PERMIT WILL NOT BE APPROVED. Employment Eligibility Verification (Form I-9) (see backside of the form for acceptable ID documents) https://sites.google.com/a/msdsc.us/substitute-instructions/home Step 5. Employee's Withholding Allowance Certificate (Form W-4) https://sites.google.com/a/msdsc.us/substitute-instructions/home **Step 6**. State of Indiana Employee's Withholding Exemption and County Status Certificate (Form WH-4) https://sites.google.com/a/msdsc.us/substitute-instructions/home **Step 7**. ACH Agreement for Preauthorized Deposit (need voided check for checking account or bank information for savings account) https://sites.google.com/a/msdsc.us/substitute-instructions/home Step 8. PERMIT SUBSTITUTE TEACHERS NEED ADDITIONAL ITEMS: You will be placed on our sub list only after you have returned all completed forms, interviewed and have completed the mandatory online orientation. __ Substitute Teachers, upon receipt of your completed application and all required documentation, will be contacted to schedule an interview. The interview will take approximately 30 minutes. After the interview process, you may be directed to complete the mandatory online orientation. If you have questions, please contact Deb Griffin (260) 665-2854 extension 1305

Incomplete applications will be held for 30 days and then destroyed.

dgriffin@msdsc.us

M:\Share\APPLICATION FORMS (MSD Application – Classified Staff and Subs) Revised 01/10/17

of Steuben County

Metropolitan School District of Steuben County

400 South Martha Street Angola, IN 46703 260.665.2854

Web Site: www.msdsteuben.k12.in.us Member: North Central Association

Date of Application: _____

PERSONNEL APPLICATION FOR NON-CERTIFIED STAFF AND/OR PERMIT SUBSTITUTE TEACHER

PLEASE FILL OUT ALL BLANKS WITH COMPLETE, DETAILED INFORMATION. Your application must include a copy of your transcript(s) or Praxis ParaPro Assessment Scores (for instructional assistant and substitute teacher positions only). You are encouraged to attach a vita sheet. Those applicants who desire or believe they will need one or more accommodations to participate in the application and interview process should contact the above address and telephone number.

Name in full (F	Print) First		Date of application		
,	First	Middle	Last		
Address				Telephone number	_
	Street				(Include Area code)
				Email Address	
	City	State	Zip		
		POSITIO	ON(S) BEING SOU	<u>IGHT</u>	
☐Food Service	ce Sub				
☐Custodial	□Sub				
Secretarial	□Sub				
☐Coaching p	osition(s):				
☐Instructiona	ıl Assistant (Attach	: Transcripts showing	g 60 credit hours or	Praxis ParaPro Assessm	ent Scores)
☐Substitute 1	Гeacher (Attach: S	ubstitute Teacher Pe	rmit, Transcripts sh	nowing 60 credit hours).	
I am available	to substitute Fu	ıll Time ☐Part Time			
I would like to	substitute in the fo	ollowing buildings:	Elementary	Middle School	High School
			EDUCATION		
Name of High	School attended_				
Grade last atte	ended in high scho	ool	d you graduate?		
List any trainir	ng you have receiv	ed or experience you	have in the area in	n which you are applying:	

WORK EXPERIENCE OTHER THAN TEACHING

Name and Location of	10 1 15 1	From		То				
Company (Begin with most recent)	Kind of Business	Month	Year	Month	Year	Reason for leaving		
,								
Are you employed at the present time?								
REFERENCES								
Character references: List the name, address and phone number of three people who can vouch for your conduct, honesty, and work habits?								
NAME	POSITION	PHONE NUMBER			PRESENT ADDRESS			
<u>AGREEMENT</u>								
I certify that the information given on this application is true and complete to the best of my knowledge.								
I authorize you to make such investigations and inquiries as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability on account of their responses to inquiries made in connection with my application herein.								
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the MSD of Steuben County.								
Signature of Applicant		Date						

PLEASE PRINT THIS AND THE FOLLOWING PAGE, SIGN, DATE AND MAIL OR EMAIL TO THE NAME LISTED BELOW ALONG WITH THE REQUIRED INFORMATION ON THE FIRST PAGE:

Deb Griffin, Administrative Assistant M.S.D. of Steuben County 400 South Martha Street Angola, IN 46703-1953 Phone: 260.665.2854 Extension 1305

Email: dgriffin@msdsc.us

Completed applications remain on active file for one year. Renewal of the application is the responsibility of the applicant and can be accomplished by forwarding a written notice along with updates.

The School Board of Trustees declares it the policy of the Metropolitan School District of Steuben County to provide equal educational and employment opportunities regardless of race, creed, color, religion, national origin, age, gender, and where applicable marital status, familial status, parental status, domicile, disability, genetic information, veteran status, sexual orientation, political beliefs, reprisal, or any legally protected characteristic. For inquiries of: Title IX, Section 504, American With Disabilities Act Contact: Director of Curriculum & Instruction, 400 S. Martha Street, Angola, IN 46703, (260) 665-2854

BACKGROUND INFORMATION

Yes	□No	1.	Is your conduct as an employee or the quality of your work the focus of any investigation by your current employer?
□Yes	□No	2.	Have you ever been reprimanded, disciplined, discharged, had your employment contract non-renewed, or asked to resign from a prior position?
□Yes	□No	3.	Have you ever resigned from a position after being offered the opportunity to resign rather than be terminated?
∐Yes	□No	4.	Have you ever resigned from a prior position without being asked; but under circumstances involving your employer's investigation of sexual conduct with another person, mishandling of funds, or criminal conduct?
□Yes	□No	5.	Have you ever had your teaching license suspended or revoked by any entity that may issue a teaching license?
□Yes	□No	6.	Have you ever had an inquiry with the Department of Child Service where you have been the subject of a substantiated report of child abuse or neglect?
□Yes	□No	7.	Have you ever had an inquiry with the Child Welfare Agency in any state where you have committed child abuse or neglect?
□Yes	□No	8.	Have you ever been investigated for, charged with, or pled guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor?
□Yes	□No	9.	Have you ever pled guilty, been convicted of, or otherwise been found in violation of the law by a court for any matter other than a minor traffic violation?
□Yes	□No.	10.	Have you ever been charged with a crime, other than a minor traffic offense, where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program?
			f you checked YES for any of the ten questions, explain the cances on a separate sheet and attach it to this application.
			AUTHORIZATION AND RELEASE
action includ	ling, without li	mitation	tion with any request for, or provision of such information, any claims or accusations of , defamation, infliction or emotional distress, invasion of privacy, or interference with nerwise have against the school district, its officials, employees, trustees or agents, or against any provider of any information.
I have	read this auth	norizatio	n and release of all claims, and I expressly agree to the terms set out herein.
			epancies between what I have checked above and the Expanded Background, I will arate sheet and attach it to this application.
Signature:			Date:

Metropolitan School District of Steuben County 400 South Martha Street Angola, IN 46703