

Choice Schools Associates L.L.C. Employment Application

PO Box 141493, Grand Rapids, MI 49514
Phone: (616) 785-8440 Fax: (616) 785-8455

Choice Schools Associates L.L.C. is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, political belief or disability. Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof shall result in immediate termination.

Last Name:		First Name:	Middle Name:
Current Address:		Home Address:	
City, State, Zip:		City, State, Zip:	
Telephone Number: Home: () -	Alternative Number: () -	Social Security #: - -	Date of Application: ____/____/____

Position(s) Applying For:	Specific Academy Locations/Cities (if known):
How did you learn about CSA?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Job Fair <input type="checkbox"/> Relative <input type="checkbox"/> Walk In <input type="checkbox"/> Other: _____	

Certification (teaching applicants only)
Do you hold a valid MI teaching certificate? Yes No Applied For In Progress

State(s) of Certification:	Type of Certificate (Professional, Provisional, Continuing, Etc):
Date Issued: ____/____/____	Date Expires: ____/____/____
What is your certification (i.e. K-5 All, Etc.)?	
List any special endorsements (i.e. Art, Music, Etc):	

Teacher Applicants: a copy of your certificate or 90-Day letter is required for employment.

Employment Information

Have you ever filed an application with us before? Yes No

Have you ever been employed with us before? Yes No

Are you currently employed? Yes No

On what date would you be available for work? ____/____/____ Full Time Part Time

Are you legally entitled to work in the United States? Yes No

Proof of citizenship or immigration status will be required prior to employment.

Have you ever been convicted of or pled no contest to a crime? Yes No

If yes, please explain: _____

Diplomas and Degrees

Attach educational history including undergraduate and graduate coursework and transcripts.

	Name of School	City, State	Course of Study	Years Completed	Diploma/Degree	Grade Point Average
High School						
Undergraduate College						
Graduate College						
Other (Specify)						

Employment History

List your current or most recent employment first. Include work related internships, military and volunteer work. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Current Employer:	Dates Employed	Work Performed/ Accomplishments
Telephone Number: () -	From: _/_/___	
Address:	To: _/_/___	
City, State, Zip:	Hourly Rate/Salary	
Job Title:	Starting: \$	Supervisor's Name:
Reason for Leaving:	Final: \$	May we contact?

Previous Employer:	Dates Employed	Work Performed/ Accomplishments
Telephone Number: () -	From: _/_/___	
Address:	To: _/_/___	
City, State, Zip:	Hourly Rate/Salary	
Job Title:	Starting: \$	Supervisor's Name:
Reason for Leaving:	Final: \$	May we contact?

Previous Employer:	Dates Employed	Work Performed/ Accomplishments
Telephone Number: () -	From: / /	
Address:	To: / /	
City, State, Zip:	Hourly Rate/Salary	
Job Title:	Starting: \$	Supervisor's Name:
Reason for Leaving:	Final: \$	May we contact?

List any professional affiliations, volunteer work or other work related activities (you may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status):

Work Related References (Minimum of Three References Required)

Name:	Title:
Company:	Relationship:
Address:	City, State, Zip:
Telephone:	Number of Years Known:

Name:	Title:
Company:	Relationship:
Address:	City, State, Zip:
Telephone:	Number of Years Known:

Name:	Title:
Company:	Relationship:
Address:	City, State, Zip:
Telephone:	Number of Years Known:

RELEASES AND APPLICANT'S SIGNATURE

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that Choice Schools Associates may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from Choice Schools Associates and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

I understand and agree that pursuant to 1993 Public Act 68 Choice Schools Associates, on behalf of the Academy Board, must request a criminal history check on me from the Central Records Division of the Michigan Department of State Police. Until that report is received and reviewed by Choice Schools Associates, I am regarded as a conditional employee and if the report received from the Department of State Police is not the same as my representation(s) above, respecting either my absence of any conviction(s) or any crimes of which I have been convicted, my employment agreement is voidable at the option of Choice Schools Associates.

All hiring and employment at Choice Schools Associates is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by Choice Schools Associates has no specific term and may be terminated by the employee or Choice Schools Associates with or without notice. I acknowledge that Choice Schools Associates has not made any promises or representations that differ from those contained in this paragraph.

I understand that I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with Choice Schools Associates, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution, or government agency from all liability with regard to furnishing information to Choice Schools Associates. I agree to release and hold harmless Choice Schools Associates from all liability with respect to the receipt of such information.

I certify the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with Choice Schools Associates may be terminated.

Applicant's Printed Name: _____

Signature: _____ Date: _____

**CONSENT FOR RELEASE OF INFORMATION FROM CURRENT OR
FORMER EMPLOYER**

Required under Act 451 of Public Acts 1976, Section 1230b, May 8, 1996

In connection with my application for employment through Choice Schools Associates, and pursuant to Section 1230b of the Revised Michigan Code of 1976, Act No. 451 of the Public Acts of 1976, I, the undersigned, hereby authorize my current and/or former employer(s) to disclose to the Academy any unprofessional conduct by myself and to make available to the Academy any copies of all documents in my personnel record maintained by my current and/or former employer(s) relating to that unprofessional conduct. **The legal definition of unprofessional conduct can be found on the back of this form.

I further release my current and/or former employer(s), and employees acting on behalf of the current or former employer(s), from any liability for providing the information described above, and I waive any written notice required under section 6 of the Bullard-Plawecki employee right to know act, Act No. 397 of the Public Acts of 1978, beginning section 423.506 of the Michigan Compiled Laws.

It is my understanding that any information obtained in the course of this investigation will be held strictly confidential by the Academy and its agents. Information gathered will be used only for the purpose of evaluating my qualifications for employment in the position for which I have applied.

I understand that the Academy cannot hire an applicant who does not sign this statement, as described in Act 451 of Public Acts of 1976, section 1230b(1).

_____ **Date**

_____ **Applicant's Signature**

_____ **Applicant's Social Security Number**

_____ **Please Print Name Here**

Most Recent Employer: _____

Mailing Address: _____
(including street address, city, state and zip code)

Contact Person: _____ **Telephone No.:** _____

Former Employer – Please complete this section and return in the enclosed envelope	
Employment Dates:	From _____ To _____
Unprofessional Conduct While Employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please answer the following questions:	
Date/dates of incident:	_____ Copies of documentation enclosed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for leaving employment:	<input type="checkbox"/> Discharged <input type="checkbox"/> Resigned <input type="checkbox"/> Other
Company Name:	_____
Name of official preparing this document:	_____
Signature of official preparing this document:	_____
Title:	_____ Telephone: _____ Date: _____

Pease provide information for all former employers for whom you have worked in the last 10 years:

Employer	Contact Person	Telephone No.

***According to Act No. 451 of the Public Act of 1976, "unprofessional conduct" means 1 or more acts of misconduct; 1 or more acts of immorality, moral turpitude, or inappropriate behavior involving a minor; or commission of a crime involving a minor. A criminal conviction is not an essential element of determining whether or not a particular act constitutes unprofessional conduct."*

Choice Schools Associates, LLC

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Grand Rapids, MI 49514

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www.choiceschools.com

Criminal Records Check Release

Michigan Department of State Police
Central Records Division
Freedom of Information Unit
7150 Harris Drive
Lansing, MI 48913

As a prospective employee/volunteer of Choice Schools Associates, I understand that it is the agency's policy to secure conviction criminal history information as part of their pre-employment screening process using the information provided below:

Name: _____

Maiden Name/Names Previously Used: _____

Address: _____

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____

MI Drivers License Number: _____

I understand that the above information is required by the Criminal Records Division of the Michigan State Police, Lansing, Michigan. I authorize Choice Schools Associates, LLC to utilize the above information for the sole purpose of obtaining a conviction only criminal history file search.

Signature of Prospective Employee/Volunteer

Date

RELEASE OF INFORMATION

I authorize Choice Schools Associates to release pertinent information regarding the results of my criminal inspection to the Academy I will be assigned, to other local and intermediate school districts upon request, and to the Academy's authorizer.

Signature

Date

Witness

Date