



# SMETHPORT AREA SCHOOL DISTRICT

414 South Mechanic Street  
Smethport PA 16749  
(814) 887-5543



## NON-TEACHING APPLICATION FOR EMPLOYMENT

(If an applicant desires assistance in completing the application, the school district will attempt to provide the necessary assistance.)

(PLEASE PRINT)

Teacher's Aide / Clerical     Cafeteria     Custodial     Paid Supplemental Position     Other (please list below)

Position(s) Applied For \_\_\_\_\_ Date of Application \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address Number \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Telephone Number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email Address \_\_\_\_\_

Have you ever filed an application with us before?     Yes     No    If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?     Yes     No    If Yes, give date \_\_\_\_\_

Are you currently employed?     Yes     No

May we contact your present employer?     Yes     No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?     Yes     No    Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? \_\_\_\_\_

Are you available to work:     Full Time     Part Time     Shift Work     Temporary     Paid Supplemental

Are you currently on "lay-off" status and subject to recall?     Yes     No

Can you travel if a job requires it?     Yes     No

Would you like to be placed on our substitute list for position you are applying for?     Yes     No     N/A (paid supplemental)

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

**Employment Experience.** Start with your most current or last job.

1.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate/Salary Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate/Salary Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate/Salary Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	Dates Employed From	To	Work Performed
	Address			
	Telephone Number(s)	Hourly Rate/Salary Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

EDUCATION	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

If any of your education or employment was under a different name, please indicate and provide that name.

Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience and/or state any additional information you feel may be helpful to us in considering your application:


You must give complete answers to all questions. If you answer "Yes" to any question, you must list all offenses, and for each conviction provide date of conviction and disposition, regardless of the date or location of occurrence. Conviction of a criminal offense is not a bar to employment in all cases. Each case is considered on its merits. Your answers will be verified with appropriate police records.

Criminal Offense includes felonies, misdemeanors, summary offenses, and convictions resulting from a plea of "nolo contendere" (no contest).

Conviction means you were found guilty of a criminal offense by a Judge or jury, entered a plea of nolo contendere, or plead guilty and includes determinations before a court, a district justice, or a magistrate which results in a fine, sentence, or probation.

You may omit: minor traffic violations, offenses committed before your 18<sup>th</sup> birthday which were adjudicated in juvenile court or under a Youth Offender Law, and any convictions which have been expunged by a court or for which you successfully completed an Accelerated Rehabilitative Disposition program.

<p>Were you ever convicted of a criminal offense?  <input type="checkbox"/> Yes      <input type="checkbox"/> No</p>	<p>Have you ever forfeited bond or collateral in connection with a criminal offense?    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p>
<p>Are you currently under charges for a criminal offense?  <input type="checkbox"/> Yes      <input type="checkbox"/> No</p>	<p>Within the last ten years, have you been fired from any job for any reason?    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p>
<p>Within the last ten years, have you quit a job after being notified that you would be fired?    <input type="checkbox"/> Yes      <input type="checkbox"/> No</p>	<p>Have you ever been professionally disciplined in any state?  <input type="checkbox"/> Yes      <input type="checkbox"/> No  <small>Professionally disciplined means the annulment, revocation, or suspension of any certificate or license or having received a letter of reprimand from an agency, board, or commission of state government.</small></p>

Are you subject to any visa or immigration status which would prevent lawful employment?       Yes     No

**NOTE:** If you answered "Yes" to any of the above questions, please provide a detailed explanation on a separate sheet of paper, including dates, and attach it to this application. Please print and sign your name on the sheet and include your social security number.

\* \* \* \* \*

**REFERENCES:** Include people who have supervised your work or teaching or others who have personal knowledge of your character and abilities.

Name	Position	Address	Telephone

To comply with Federal laws (including Title IX of Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990), State laws, and State Department of Education regulations concerning equal rights and opportunities and to assure these within our school community, the Smethport Area School District declares itself to be an Equal Rights and Opportunities District. As an Equal Rights and Opportunities District, it does not discriminate against individuals or groups because of race, color, national origin, ethnicity, religion, age, sex, marital status, veteran status, or handicap or disability status. The District's commitment to nondiscrimination extends to students, employees, prospective employees, and the community.

Inquiries regarding compliance may be directed to  
Mr. Brice N. Benson, Compliance Coordinator, at 814-887-5543.

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary at arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed one year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

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

\_\_\_\_\_  
Date

THIS SPACE FOR OFFICE USE

Date Interviewed: \_\_\_\_\_

Disposition: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## PA State Police Criminal Record Check (ACT 34) Background Check of Prospective Employees

As a measure to prevent child abuse, the Pennsylvania State Legislature passed Act 34 of 1985 which requires a prospective employee who would work directly with the children to secure a background check from the State Police. (If the applicant is not a resident of Pennsylvania, this check is completed through the Pennsylvania Department of Education by the Federal Bureau of Investigation.) Please check the appropriate statement.

I have attached a copy of the background check of the Pennsylvania State Police dated \_\_\_\_\_ and understand that if employed, I must submit the original. (Processed forms are valid for five years from date of issuance starting with 2015.)

I have requested a background check from the Pennsylvania State Police on form SP4-164 dated \_\_\_\_\_ and will forward the report to the Smethport Area School District when received.

As an out-of-state applicant, I have \_\_\_\_\_ attached / \_\_\_\_\_ requested an FBI background check record.

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### FBI Fingerprint (ACT 114) FBI Federal Criminal History Records Clearance

of 2006, Section 111 of the Public School Code was amended effective April 1, 2007. All student teachers (participating in classroom teaching, internships, clinical or field experience) and prospective employees (including but not limited to administrators, teachers, substitutes, janitors, cafeteria workers, office employees) of public and private schools, Intermediate Units, and area vocational-technical schools, including independent contractors and their employees and bus drivers, who have direct contact with children, must provide to their employer a copy of their Pennsylvania State Criminal History Background Check and their Federal Criminal History Record that cannot be more than one (1) year old. This only applies to employees hired on or after April 1, 2007. Employees hired prior to April 1, 2007, are only required to provide the Federal Criminal History record if they have lived outside of the state for at least two years immediately preceding their application for employment.

All information regarding process, policy and print locations may be found at <https://uenroll.identoGO.com>. Telephonic registration is available at 1-855-845-7434 Monday thru Friday, 8AM to 6PM EST. During the registration process, all demographic data for the applicant is collected (name, address, SSN, etc.) so there is no data entry required at the fingerprint collection site.

I have attached a copy of the FBI Federal Criminal History Records Clearance dated \_\_\_\_\_ and understand that if employed, I must submit the original. (Processed forms are valid for five years from date of issuance starting with 2015.)

I have requested a FBI Federal Criminal History Records Clearance dated \_\_\_\_\_ and will forward the report to the Smethport Area School District when received.

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### Child Abuse History Clearance (ACT 151)

Each candidate must submit with his/her employment application a copy of an official clearance statement obtained from the Pennsylvania Department of Public Welfare or a statement from the Department of Public Welfare that no record exists. The clearance statement must be no more than one (1) year old. The applicant **MUST** submit the **ORIGINAL** report prior to employment. Applications can be done on-line at the Pennsylvania State Police Website at [www.epatch.pa.gov/home](http://www.epatch.pa.gov/home).

I have attached a copy of the Pennsylvania Child Abuse History Clearance dated \_\_\_\_\_ and understand that if employed, I must submit the original. (Processed forms are valid for five years from date of issuance starting with 2015.)

I have requested a Pennsylvania Child Abuse History Clearance on Form CY 113 dated \_\_\_\_\_ and will forward the report to the Smethport Area School District when received.

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### Arrest/Conviction Report & Certification Form PDE-6004 (ACT 24)

Each candidate must sign a PDE-6004 to indicate that by subsection (j)(4) of 24 P.S. §1-111, this form shall be utilized by employees to provide written notice within seventy-two (72) hours after an arrest or conviction for an offense enumerated under 24 P.S. §1-111(e) and occurring after September 28, 2011. In accordance with 24 P.S. §1-111, employees completing this form are required to submit the form to the administrator or other person responsible for employment decisions in a school entity. This form can be found at: <https://www.smethportschools.com/Human-Resources>.

I have attached the original copy of the Arrest/Conviction Report and Certification Form dated \_\_\_\_\_.

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## Sexual Misconduct/Abuse Disclosure (Act 168)

This form can be found at: <https://www.smethportschools.com/Human-Resources>

- Must be completed by anyone who has not resided in PA for the last 10 years
- Current employer and/or any employer that the applicant has/had direct contact with children must complete the form (current employer must complete even if applicant does not have direct contact with children)
- Applicant must enter current or former employer in the top section
- If self-employed, enter name of company, check "So applicable employment" and list "Self-employed"
- Applicant completes Section 1 and answers the questions on the back of the sheet, sign, and date no matter if you have a current employer, self-employed, or no applicable employment
- Applicant then gives to current/former employer for Section 2 to be completed or can bring it back into the Superintendent's Office to be mailed
- **THE EMPLOYER THEN HAS TO MAIL OR FAX IT BACK TO THE SUPERINTENDENT'S OFFICE. THE APPLICANT CANNOT BRING IN THE COMPLETED FORM, IT MUST COME DIRECTLY FROM THE EMPLOYER.**

## Recognizing & Reporting Child Abuse (Act 31/126)

- Free online training must be completed as mandated by PDE
  - Go to [www.reportabusepa.pitt.edu](http://www.reportabusepa.pitt.edu) and register
  - Once completed, print out certificate and file with the Superintendent's Office
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**ALL OF THE FORMS/CLEARANCES LISTED ABOVE CAN BE OBTAINED BY VISITING, [WWW.SMETHPORTSCHOOLS.COM/HUMAN-RESOURCES](http://WWW.SMETHPORTSCHOOLS.COM/HUMAN-RESOURCES)**

**ALL PAPERWORK MUST BE COMPLETE AND ON FILE BEFORE AN APPLICANT CAN BEGIN EMPLOYMENT. IF YOU SHOULD HAVE ANY QUESTIONS WITH ANY OF THESE FORMS, PLEASE CONTACT MRS. CRYSTAL WOODARD AT (814) 887-5543.**