

Silver River Mentoring and Instruction, Inc.
EMPLOYMENT APPLICATION

Applicants will be considered for all positions without regard to race, religion, color, sex, age, national origin, disability, marital or veteran status, or any other legally protected status. Please print legibly in ink.

Last Name	First Name	Middle Name	Date
Street Address			Home Phone
City, State, Zip Code		Cell Phone	Social Security #

Are you eligible to work in the United States? Yes _____ No _____ <i>Proof of eligibility will be required before you can be employed.</i>	Are you 18 years of age or older? Yes _____ No _____
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List previous place(s) of residence during the last five years (Use additional sheet(s) if necessary)

<i>Street Address</i>	<i>City</i>	<i>State & Zip</i>	<i>Dates</i>

Education and Training	<i>Major Course</i>	<i>Years Attended</i>	<i>Grad. Yes/No Degree/Diploma</i>
High School			
Business or Technical			
College			
Graduate			

General Information
Are you related to any employee of this company? Yes _____ No _____
Relationship _____ Name _____

An Equal Opportunity Employer, Drug Free Workplace

Employment History for the Past Seven (7) Years. Use additional sheet(s) if necessary.

Name of Company	Employed From/To	Monthly Pay Start/End	Supervisor Name/Title
Street Address		City, State, Zip	Telephone Number
Job Title	Reason for Leaving		
Duties			

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Duties			

United States Military Service Record		
Branch _____	Rank at Discharge _____	Dates of Service (Month/Year) From _____ To _____
Describe your duties and any special training. _____ _____ _____ _____		

Please list any periods of unemployment of four weeks duration or more during the last five years:	
Dates _____ _____ _____	Reason(s) for unemployment _____ _____ _____

If you are presently employed, why do you wish to change? _____
If you are presently employed, may we contact your employer? Yes _____ No _____

Have you ever been discharged or asked to resign? Yes _____ No _____ If yes, explain fully: _____ _____
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Have you ever been convicted of a crime, pled guilty or nolo contendere, had a pretrial intervention or withheld adjudication? Yes _____ No _____ If yes, give dates and type of action: _____ _____

Conviction record not necessarily a bar to employment; age, time of offense, history and rehabilitation will be considered.

Do you have a valid Drivers License? Yes _____ No _____ State _____ Number _____
Have you had any moving traffic violations in the past 36 months? Yes _____ No _____
If yes, please explain: _____

List three (3) personal references who are not relatives				
Name	Address, City, State	Employer	Work Phone	Home Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Can you perform all duties listed in the job description, with or without reasonable accommodations?

Yes _____ No _____ If accommodations are necessary, please describe:

Position(s) Applied For:

Location Preferred:

Will you work overtime upon request? Yes _____ No _____

Date you would be available for employment: _____

PLEASE READ BEFORE SIGNING:

I hereby certify that I have read and understood the job description(s) for the positions(s) for which I am applying.

I hereby certify that all the facts and information listed on this employment application are true and correct. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application, or if employed, for termination at any time upon its discovery.

I authorize the references listed on this application to give any and all information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand that due to the nature of the work, a criminal background check and Motor Vehicle Report will be completed.

By submitting this application for employment, I agree that if hired I will conform to the rules and policies of the Program, and understand that my employment and compensation will be for an indefinite period of time, and may be terminated with or without cause and with or without notice at any time, at the option of either the Program or myself.

I freely and voluntarily submit to urinalysis, breath and/or other tests as shall be determined by the Program in the final selection process of applicants for employment, for the purpose of determining the drug/alcohol content thereof. I understand that either refusal to submit to the urinalysis/breath screen or failure to qualify according to the minimum standards established by the Program for this screen may disqualify me from further consideration for employment. I further understand that upon commencement of employment with the Program, I may again be required to submit to a urinalysis drug screen, breath alcohol test, and/or other tests at any time as a condition of continued employment. I understand that failure to take any such test, or unsatisfactory test results, may result in my dismissal.

If hired, I will be required to serve a three (3) month introductory period.

Signature

Date

FOR COMPANY USE ONLY

Interviewed by: _____ Date: _____

Previous Employment Verification:

Employer	Date	Person Responding	Notes
_____	_____	_____	_____

MVR _____ DOE Screening _____ IN-9 Form/Eligibility Verified _____



Addendum to Silver River Mentoring and Instruction Application

****Background Security Questions****

IMPORTANT:

- Any false statement knowingly made in this application is grounds for disqualification and/or dismissal from employment.
- If in doubt, disclose and explain rather than conceal.
- Sealed or expunged records must be revealed to the Citrus County School District pursuant to Florida Statutes 943.0585 and 943.059
- Failure to disclose any and all arrests will result in an applicant being ineligible for employment for a time period of not less than one (1) year.

In order to be considered for employment by Silver River Mentoring and Instruction, you must answer all background information. Acknowledgment of a prior arrest and/or conviction will not automatically disqualify you from consideration for employment. However, your omission of any criminal history information will subject you to termination.

(Note: Any and all criminal history documents provided to or acquired by Silver River Mentoring and Instruction is turned over to the Citrus County School Board. These documents are considered property of CCSB and will not be returned or produced to the applicant).

In relation to criminal offense (including dismissal or dropped, military and juvenile arrests/charges); have you ever (been), please check:

- Arrested
- Charged
- Convicted
- Pled nolo contendere (no contest)
- Had a record sealed or expunged
- Placed on probation
- Enrolled in a pretrial diversion program
- Had adjudication withheld in a criminal offense, felony or misdemeanor

1. If you checked any of the above, please list the following:

- Date of arrest/charge _____
- Location of arrest/charge _____
- Exact charge(s), including statute number of charge, level of charge (i.e. misdemeanor/felony): _____

- Final disposition/outcome of charges and/or arrest _____

2. Are you currently being investigated for any criminal offense, other than a non-criminal or minor traffic violation?

Yes No

If yes, please explain. _____

3. Have you ever had a report of child abuse or sexual activities involving a K-12 or minor filed against you or been named by a state agency responsible for child welfare as a perpetrator in an indicated report of child abuse or neglect where cause was found? Yes No

Initials: _____



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If yes, please explain. _____

4. Had a complaint been filed or are you currently being investigated by a state agency for child abuse, neglect, or sexual abuse or activity related to a K-12 minor? Yes No

If yes, please explain. _____

5. Do you understand that if you were offered a position and answered yes to any of the above questions, you would need to immediately provide the Citrus County School Board Human Resource Department the following documentation for each incident prior to being fingerprinted and drug tested:
- Arrest report or police affidavit
 - **CERTIFIED/SEALED** copy of final disposition of charges from the Clerk of Court
 - Documentation of completion of probation

Yes No

****Professional Ethics/Certification Security Questions****

6. Are you under investigation, been charged with any violation or disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure? Yes No

If yes, please explain. _____

7. Are you currently on probation from the Department of Education of Professional Practices? Yes No

If yes, please explain. _____

8. Are you currently on criminal probation? Yes No

9. Have you ever failed to complete a contract for educational services in any educational or school-related position?
 Yes No

If yes, please explain. _____

10. Have you ever had a contract non-renewed, non-extended, or been dismissed from employment, or resigned in lieu of any of the aforementioned consequences? Yes No

If yes, please explain. _____

Initials: _____



Addendum to Silver River Mentoring and Instruction Application

11. Have you ever been under a formal investigation while employed where probable cause was found? Yes No

If yes, please explain. _____

12. Have you ever had a professional certificate, credential or license (of any kind) revoked or suspended, or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct? Are there any pending adverse actions against you?

If yes, please explain. _____

13. 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

If yes, please explain. _____

14. Have you ever surrendered a teaching certificate, license or permit? Yes No

If yes, please explain. _____

15. Do you verify that you understand any omission, incorrect, or false responses to **ANY** information in your application or this addendum will constitute a reason for refusal to hire or dismissal? Yes No

Applicant Signature

Date