Last Name:       First Name:       MI:

Home Address:

*Street, City, State, Zip*

Phone:       E-mail:

**Education** (Undergraduate and Graduate)

(Attach a supplemental page if necessary)

|  |  |
| --- | --- |
| *Institution* | *Dates Attended* |
| *Major* | *Degree* |

|  |  |
| --- | --- |
| *Institution* | *Dates Attended* |
| *Major* | *Degree* |

|  |  |
| --- | --- |
| *Institution* | *Dates Attended* |
| *Major* | *Degree* |

**Employment History:** List all full-time experience, both in and outside the field of education, beginning with your current employment. (Attach a supplemental page if necessary).

Position:       Employer & Location:

Student Enrollment (if applicable):       Years (From/To):

Position:       Employer & Location:

Student Enrollment (if applicable):       Years (From/To):

Position:       Employer & Location:

Student Enrollment (if applicable):       Years (From/To):

**Note:** Candidates selected for an interview will be required to provide at least five current references. References should reflect a broad representation of professional relationships.

Length of Present Contract:       Expiration Date:       Date Available:

Where did you learn about this position?

What is your reason for leaving your last position or wanting to leave your current position?

List all other names or aliases you have used:

Have you listed ALL current and former employers who are education

providers in the Employment History section of this application?

If no, please provide them all on a separate sheet. Yes  No

**VETERAN’S PREFERENCE**

Are you a “Veteran” as defined under Oregon law (ORS 408.225(f))? Yes  No

If yes, ATTACH Form DD-214 or other similar discharge document.

Are you a “Disabled Veteran” as under Oregon law (ORS 408.225(c))? Yes  No

If yes, ATTACH document verifying disabled veteran status.

Are you requesting a “veteran’s preference” according to ORS 408.230 Yes  No

for consideration with this application for this position? If yes, ATTACH

a separate document explaining which transferrable skills acquired in the

military address the skills required for this position.

**Required Information, Authorizations and Acknowledgments**

Oregon law requires certain information from all school employees for an education provider at time of hiring. "Education provider" includes among others, the following institutions:

K-12 school district;

Education service district;

Any state operated program serving kindergarten through grade 12 students;

Public charter school; and

Private school;

For the purposes of this application the following questions must be answered, information provided and authorizations granted. ***Your signature is required at the end of this application for your application to be complete.***

|  |  |
| --- | --- |
| **Questions** | **Answer Yes/No** |
| 1. Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct or alleged violation of professional standards of conduct or when you had reason to believe such investigation was imminent? |  |
| 1. Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct? |  |
| 1. Have you ever failed to complete a contract for educational services in any educational or school-related position for any alleged misconduct or alleged violation of professional standards of conduct? |  |
| 1. 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? |  |
| 1. 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? |  |
| 1. Have you ever surrendered a professional license of any kind before its expiration? |  |
| 1. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure? |  |
| 1. Have you ever been convicted or been granted conditional discharge by a court for any: (a) felony, (b) misdemeanor, or (c) major traffic violation, such as; driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended, revoked or used in violation of any license restriction; or failure to perform the duties of a driver or witness at an accident? |  |
| 1. Have you ever entered a plea of guilty or No Contest relative to any charge for an offense listed in the question 8 above? |  |
| 1. Have you ever had any civil judgment or other court order entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking or other threatening behavior toward other persons? |  |
| 1. Have you EVER been the subject of a substantiated report of child abuse or sexual conduct (involving a K-12 student or minor child)? |  |
| 1. Are you currently the subject of an ongoing investigation related to a report of suspected child abuse or sexual conduct (involving a K-12 student or minor child)? |  |
| **If you answered “yes” to any questions, please explain in detail on separate sheet indicating the corresponding question number. Note: Existence of a criminal record does not constitute an automatic bar to employment.** | |

|  |  |
| --- | --- |
| **Consents and Authorizations** | **Answer Yes/No** |
| 1. I hereby authorize all my current and former employers who are education providers to disclose the (a) dates of my employment; (b) whether I was the subject of any substantiated reports of child abuse or sexual conduct related to my employment; (c) the dates of any substantiated reports; (d) the definitions of child abuse and sexual conduct used by the education provider when the determination was made that any reports were substantiated; and (e) the definitions of child abuse and sexual conduct used by my education provider employer to determine whether any reports were substantiated. |  |
| 1. I hereby authorize my current or former education provider employers to release any disciplinary records of a crime listed in ORS 342.143 for which I was convicted. |  |
| 1. I authorize my listed references, current and past employers and educational institutions, and anyone else who has information about my work history, education qualifications, or fitness to provide such information to the school for which I have completed an employment application. I release the school and all persons providing this information to the school, from any liability whatsoever for obtaining and providing that information, regardless of the results. |  |

|  |  |
| --- | --- |
| **Acknowledgements** | **Answer Yes/No** |
| 1. I acknowledge that should I be offered a contract for the position of Executive Assistant as a result of this application, the school may not enter an employment contract or agreement that:   (a) Has the effect of suppressing information relating to an ongoing investigation related to a report of suspected child abuse or sexual conduct or relating to a substantiated report of child abuse or sexual conduct by a current or former employee;  (b) Affects the duties of the education provider to report suspected child abuse or sexual conduct or to discipline a current or former employee for a substantiated report of child abuse or sexual conduct;  (c) Impairs the ability of the education provider to discipline an employee for a substantiated report of child abuse or sexual conduct; or  (d) Requires the education provider to expunge substantiated information about child abuse or sexual conduct from any documents maintained by an education provider. |  |
| 1. I acknowledge that the school may conduct an Internet search, reference checks, background investigations and confirmation of employment as a part of this application. |  |

**Verification**

The information that I have provided in this application is true and accurate to the best of my knowledge. I have answered all of the questions to the best of my ability and I have not knowingly withheld information that would negatively affect my application. (Please attach a brief explanation for any circumstances arising from the Questions above which you believe might negatively affect your application including: criminal convictions, professional license discipline, and pending investigations in any state). Any misrepresentations or omissions of fact in this application, any materials submitted with this application, or during interviews may be cause for rejection of this application or subsequent dismissal from employment, if hired.

Signed (a typed name in this field on the part of the application constitutes a valid signature)

Date

Please return the completed and signed application form with other application materials in either PDF or Word format as e-mail attachments to:

harmony.academy.careers@gmail.com

**Closing Date: June 23, 2019 (however, open until filled)**