

Printing and Submission Instructions

1. Please print one copy of the Application form (2 pages, front and back) on a single sheet. Complete and sign this document.
2. Please print three copies of the *Release to Conduct Background Check and Request for Information* sheets (2 pages, front and back). You should complete and sign side one of this document, then submit it with your application form, cover letter and any other support documentation to:

Brenda Gentle
Rochester School Department
150 Wakefield Street - Suite 8
Rochester, NH 03867-1348

3. Please do **not** send the *Request for Information* document to your references. We will contact the references if they are needed.
4. If you have questions, you may phone (603) 332-3678 or e-mail to gente.b@rochesterschools.com

ROCHESTER, NEW HAMPSHIRE SCHOOL DISTRICT

SCHOOL ADMINISTRATIVE UNIT #54

Equal Opportunity Employer

Certified Staff Application

For the position of: _____	Date: _____
Name _____	Date available: _____
Address _____	Tel #: () _____

City/State/Zip _____	Alt. Tel #: () _____
Min. salary you would accept: _____	Currently under contract? _____
Do you hold a NH Teaching Certificate? _____	If not, have you applied? _____
E-Mail Address: _____	Are you legally eligible for employment in the U.S.? _____
Have you previously worked for the Rochester School District? _____	If so, when? _____

EDUCATION AND PROFESSIONAL TRAINING

A minimum standard of a high school diploma or equivalent is necessary.

College _____	Course _____	Degree _____	Graduation Year _____
University _____	Course _____	Degree _____	Graduation Year _____
Grad Work _____	Course _____	Degree _____	Graduation Year _____
Other _____	Course _____	Degree _____	Graduation Year _____

Experience

Name & Location	Grades or Subjects Taught or Position Held	Dates (From - To)	Number Years

In addition to completion of this application, the Rochester School Department requires submission of all college transcripts, three *Request for Reference* form (attached), with *current* addresses and phone numbers of persons not related to you (**please do not forward the form to the reference for completion**), and a copy of your NH Certification. **References must include your two most recent employers.**

In compliance with State requirements, no person shall be employed in the Rochester School District unless he/she holds a NH Certificate qualifying him/her for the position applied for. This application must be complete and accurate in every detail to be considered for a position in this District. Applications remain active for one year.

A physical examination is a requirement of the State and must be completed before employment.

Please complete the reverse side.

ASSURANCES

1. I certify that I have never been convicted of a criminal offense. Further, I certify that I have never been arrested for any offenses involving sexual misconduct or moral turpitude. (If you are unable to attest to this item, please provide details of the incident(s) preventing your signature.)

Applicant Signature for Item 1 _____

2. I understand that, under New Hampshire state law, no final offer of employment can be made by the Rochester School Board unless and until successful completion of a background check, including a criminal history records check has been confirmed by the Rochester School Department. **Accordingly, I understand and acknowledge that any offer made by the Rochester School Board, its officials, agents, or assigns, whether by formal vote of the Board, written or verbal notification, or other means, is conditional and will become void and be withdrawn if warranted by the results of the criminal history records check.**

3. I certify that the facts contained in this application are true and complete to the best of my knowledge and belief. I acknowledge and understand that the Superintendent of Schools, and/or designee, and the School Board WILL BE RELYING on the information contained in this application and that the information is complete and accurate. I further understand and agree that, if employed any falsified statements or any material half-truths, material misstatements or omissions of this application, without full disclosure of all relevant facts shall be grounds for the School District to immediately VOID any employment contract with me, and shall be grounds for my immediate dismissal from employment with the School District.

Applicant Signature for Items 2 & 3 _____

FOR OFFICE USE ONLY:		
Interviewed by	Date	Evaluation

Evaluation Code:
 1 = First choice
 2 = Would employ
 3 = Would not employ

REFERENCE CHECK:			
Name of Reference	Relationship	Checked by	Results

Reference Result Code:
 1 = Strong Reference
 2 = Average Reference
 3 = Weak Reference - do not employ

City of Rochester School Department

Mr. Michael Hopkins
Superintendent of Schools

Office of the Superintendent
150 Wakefield Street, Suite #8
Rochester, NH 03867-1348
(603) 332-3678
FAX: (603) 335-7367

Mrs. Christiane Allison
Director of Student Services

Mr. Kyle Repucci
Assist. Superintendent of Schools

Mrs. Brenda Gentle
Human Resources Director

Side 1: Release to Conduct Background Investigation (To be completed by the applicant)

Section A: Release

I, _____, have applied for a position as a _____ with the Rochester School Department. I hereby grant permission to the Rochester School Department to conduct an investigation of my background, including education, employment, health, credit, reputation, military records, criminal history records and any other factors which the Rochester School Department may deem proper and necessary in order to properly assess my character and background.

I give permission for any person, business, or institution contacted in the course of such investigation to release any and all information properly requested, including the entire contents of my personnel file, and photocopies of the same if requested. I do hereby release such person, business, or institution from all liability for providing correct information. I further release such person, business, or institution from any previous agreement, verbal or written, which would prohibit the release of information pertinent to the investigation by the Rochester School Department.

I understand that, under New Hampshire state law, no final offer of employment can be made by the Rochester School Board unless and until successful completion of the criminal history records check has been confirmed by the Rochester School Department. **Accordingly, I understand and acknowledge that any offer made by the Rochester School Board, its officials, agents, or assigns, whether by formal vote of the Board, written or verbal notification, or other means, is conditional and will become void and be withdrawn if warranted by the results of the criminal history records check.**

I recognize the right of the Rochester School Department to treat, at its discretion, certain sources as confidential, and its right to withhold from me or my agent the names of such confidential sources, and information obtained therefrom.

Signature of Applicant

Date

Signature of Witness

Date

Section B: Reference Information

Name of Reference

() _____
Current Work Phone

Current Address

() _____
Current Home Phone

City/State/Zip

E-Mail

Side 2: Request for Information
(To be completed by reference)

Applicant Name: _____ Position: _____

The above named individual was previously employed by you or is otherwise known to you, and has given permission for us to request a reference. All information will be held in strict confidence and no disclosure will be made to the prospective employee. A self-addressed, stamped envelope is enclosed for reply at your earliest convenience.

In what capacity do you know the applicant? _____ How long? _____

If you are a former employer:

Applicant was employed from _____ to _____ Position _____

Reason for leaving: _____

Would you rehire this individual Yes No

Do you recommend the individual for this position? Yes No

Please check the appropriate remarks:

	Outstanding	Above Average	Average	Below Average	Don't Know
Work Performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Efficiency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperativeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promptness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please provide any comments on the applicant that would further assist us in our selection:

Signature: _____

Title: _____

Date: _____