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## **Application for Administrative Position**

Thank you for your interest in the Central Community School System. The following application is used when Administrative Positions become available with our school system. You are required to complete the entire application and return to the Human Resources Office by the prescribed date as indicated on the Administrative Vacancy announcement.

**You are reminded to initial each page of this application.**

Your application will be incomplete and removed from further consideration if:

1. The application is incomplete;
2. The application packet is received after the deadline for submission;
3. Any of the required copies are not attached or submitted;
4. The Sexual Misconduct form is not complete or submitted; and/or
5. The Consent to Perform a Background Check form is not complete or submitted.

If you have any questions or need assistance with this application process, please contact:

**Gavin Vitter**  
**Director of Human Resources**  
**Central Community School System**  
**10510 Joor Road, Suite 300**  
**City of Central, LA 70818**  
[gwitter@centralcss.org](mailto:gwitter@centralcss.org)  
**Main Office: 225-262-1919**  
**Direct Line: 225-906-4147**

## **Notice of Non-Discrimination**

The Central Community School System does not discriminate on the basis of age, race, religion, national origin, disability or gender in its educational programs and activities (including employment and application for employment), and it is prohibited from discriminating on the basis of gender by Title IX (20 USC 168) and on the basis of disability by Section 504 (42 USC 794).

# Central Community School System

Michael W. Faulk  
Superintendent



Position Applying For: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Contact Numbers: \_\_\_\_\_

E-Mail Addresses: \_\_\_\_\_

E-Mail Addresses: \_\_\_\_\_

**CERTIFICATIONS:** You are required to provide a current copy of your Louisiana (or other state issued) Teaching Certificate. ***Failure to provide a copy of a Teaching Certificate renders this application incomplete.***

Current Teaching Certificate:

1. Issuing State: \_\_\_\_\_
2. Certificate Type: \_\_\_\_\_ (A, B, C, AN, L1, L2, L3, etc)
3. Certificate Number: \_\_\_\_\_
4. List Areas of Certification: \_\_\_\_\_

Other Teaching Certificates:

1. Issuing State: \_\_\_\_\_
2. Certificate Type: \_\_\_\_\_ (A, B, C, AN, L1, L2, L3, etc)
3. Certificate Number: \_\_\_\_\_
4. List Areas of Certification: \_\_\_\_\_

**DEGREES:** You are required to provide a copy of all transcripts; including undergraduate and graduate work. ***Failure to provide a copy of all transcripts renders this application incomplete.***

List All Degrees Earned and the Issuing Institutions: (Begin with the highest Degree Earned)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**EDUCATIONAL WORK EXPERIENCE:** List the number of years (FTE) you served in the positions noted.

Classroom Teacher	_____	Program Coordinator	_____
Assistant Principal	_____	Principal (HS/Elem.)	_____
Supervisor	_____	Director	_____
Assistant Superintendent	_____	Superintendent	_____
Other (Please List)	_____	:	_____



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Briefly respond to each of the following from an employment perspective:

1. List the positions to which you have been assigned that required supervision of other employees:
2. List the positions to which you have been assigned that required you to evaluate another employee's performance; and subsequently required you to discuss with the employee their observed or noted deficiencies:
3. List the positions to which you have been assigned that required financial management, account of and for funds or other budgetary responsibilities:
4. List the positions to which you have been assigned that required you to present oral/written reports of information to patrons, employees or the general public:
5. List the positions to which you have been assigned that required the development of new programs and/or the revision of existing programs:
6. Describe why you are seeking this administrative position:

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## CONSENT TO PERFORM BACKGROUND CHECK

Date: \_\_\_/\_\_\_/\_\_\_\_\_ Driver's License #: \_\_\_\_\_ State Issue: \_\_\_\_\_

\_\_\_\_\_  
First Name Middle Initial Last Name

\_\_\_\_\_  
Maiden and/or Other Last Names Used Social Security Number

\_\_\_\_\_  
Current Address City State ZIP

## RELEASE OF INFORMATION STATEMENT

I, (print name) \_\_\_\_\_, do hereby grant the administrators of the Central Community School System my permission to verify the data contained herein for the position for which I am applying; and additionally, I grant the listed current and former employers permission to release all the information about my person and performance in their possession to these administrators. I further certify that a photocopy of this statement and signature shall serve as an original for the purpose of releasing information.

### This authorization and consent for release of personal information acknowledges that:

In the interest of maintaining the safety and security of its students and their parents and its employees, the Central Community School Board (Hereafter referred to as "Board") and any of its agents may now, or at any time I am assigned to, volunteer with or am employed by the Board, conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to, searches of educational institutions attended; financial or credit institutions, including records of loans; records of commercial or retail credit agencies; other financial statements; records of previous employment, including work history, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or of other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veteran's Administration; criminal history information on file in local, state or federal agencies; and motor vehicle records, and following an employment offer, Workers' Compensation reports from either the Department of Labor, National Personnel Records or the Office of Workers' Compensation or similar agencies under the provisions of the Fair Credit Reporting Act 15 USC section 1681 et seq. I also authorize the National Personnel Records Center, or other custodian of my military service record, to release to the Board or its agent, the following information and/or copies of documents from my military service record: DD214, service record, and any disciplinary records.

The Board or its agent may also conduct an investigation of my background to include any criminal record information maintained in the Louisiana State Police file, the FBI files, or at any other place or in any other database. As a condition for application for possible future employment with the Board I consent to the taking of my fingerprints. You are hereby notified that your fingerprints will be used to check the criminal history records of the FBI relating to you. The Louisiana State Police, any local, State or Federal entity or authority may release to the Board or its agent any and all

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information regarding me concerning any arrests, convictions or other matters relating to criminal activities, from the date of execution of this authorization until such time as my employment with the Board ceases. I agree and acknowledge that as a condition of my employment, I may be required by the Board or its agent to execute an updated authorization in the event the Board in its sole discretion deems it necessary.

The Board may also procure a consumer report or investigative consumer report on me in connection with my employment application, and if I am hired, may procure additional background check reports on me for employment purposes. Further, any consumer reporting agency or any employment screening agency may prepare the report. I acknowledge that the background check report will contain information bearing on my character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include but are not limited to: social security number verification; criminal, public, educational and, as appropriate, driving records checks; verification of prior employment; references checks; credit reports; licensing and certification checks; and drug testing results. The information will be obtained from private and public record sources, including, as appropriate, personal interviews with my associates, friends and neighbors.

I am aware that any information obtained as a result of any investigation or any information obtained as a result of an investigation through a credit reporting agency or an employment screening agency may limit my eligibility for initial or continued employment with the Board.

I understand that these searches will be used to determine hiring, work assignment or continued employment eligibility under the Board's employment or volunteer policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representatives of the Board. In addition, I release and discharge the Board and its agents or associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I may be entitled to know whether employment was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report if such a report was obtained by the Board. I also understand that I may request a copy of the report, if any from the Board at telephone number (225) 262-1919. After reading this document, I fully understand its contents and authorize the background verification.

The following are my responses to questions about my criminal record history (if any) with descriptions to any question with a **YES** answer: (In response to these questions, you may omit: (1) minor traffic violations and (2) any offense committed before your 17th birthday which was finally adjudicated in a juvenile court or under a Youth Offender law.

1. Have you ever been convicted or pled guilty before a court of any federal, state or municipal criminal offense? ***If YES, attach a copy of legal documentation.***       YES       NO
2. Have you ever pled nolo contendere, had a case against you nolle prossed, received deferred adjudication or similar disposition for any federal, state or municipal criminal offense? ***If YES, attach a copy of legal documentation.***       YES       NO
3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense? ***If YES, attach a copy of legal documentation.***       YES       NO
4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? ***If YES, attach a copy of legal documentation.***       YES       NO

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5. Have you ever been arrested? (Excluding minor traffic violations) ***If YES, attach a copy of legal documentation.***  YES  NO
6. While in military service, were you ever convicted by court martial whether summary, special or general? ***If YES, attach a copy of legal documentation.***  N/A  YES  NO
7. As of this date, do you have any pending criminal charges against you? ***If YES, attach a copy of legal documentation.***  YES  NO
8. Have you ever been terminated or recommended for dismissal or asked to resign by an employer? ***If YES, attach an explanation, including the name of the company or school system, contact person and a working phone number.***  YES  NO
9. Have you ever been dismissed, or have you resigned from any position as a result of an allegation of unlawful behavior involving a child; including, without limitation, unlawful sexual behavior? ***If YES, attach an explanation.***  YES  NO
10. Have you ever had your driver's license or any professional licenses (including teaching certificates/licenses) suspended, annulled or revoked in any state or country? ***If YES, attach an explanation.***  YES  NO
11. Have you ever been non-renewed or refused tenure? ***If YES, attach an explanation.***  YES  NO
12. Have you ever been arrested for DUI/DWI? ***If YES, attach a copy of legal documentation.***  YES  NO

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Due to the responsibility the school board has to its school children and community, the above information is needed from all applicants and employees regarding violations of criminal law.

Applicants and employees must report any convictions or offenses that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Assistant Superintendent of Human Resources.

**I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE TO HAVE ANY OF THE INFORMATION CHECKED BY THE CENTRAL COMMUNITY SCHOOL SYSTEM. I AUTHORIZE THE REFERENCES LISTED, AS WELL AS ANY OTHER INDIVIDUALS WHOM THE BOARD CONTACTS (INCLUDING MY CURRENT EMPLOYER, FORMER EMPLOYERS, AND ANY GOVERNMENT OR LAW ENFORCEMENT AGENCY), TO PROVIDE THE HUMAN RESOURCES DEPARTMENT OF THE BOARD, ANY AND ALL INFORMATION CONCERNING MY PREVIOUS OR CURRENT EMPLOYMENT. I UNDERSTAND THAT IF I LIMIT THE BOARD'S RIGHT TO CONTACT PERSONS/ORGANIZATIONS DEEMED NECESSARY BY THE BOARD, THE APPLICATION MAY NOT BE CONSIDERED FURTHER. ALSO, I RELEASE ALL PARTIES AND PERSONS FROM ANY AND ALL LIABILITY FOR ANY DAMAGES THAT MAY RESULT AS A CONSEQUENCE OF FURNISHING SUCH INFORMATION TO THE BOARD OR ANY OF ITS AGENTS, EMPLOYEES OR REPRESENTATIVES FOR PURPOSES RELATED TO THIS APPLICATION OR MY EMPLOYMENT.**

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I ALSO UNDERSTAND THAT RELATED SKILLS TESTING AND TESTING FOR THE PRESENCE OF DRUGS AND ALCOHOL IN MY BODY MAY BE REQUIRED PRIOR TO EMPLOYMENT. I AGREE THAT WITH OR WITHOUT AN ACCOMMODATION, I MUST BE ABLE TO PERFORM THE "ESSENTIAL FUNCTIONS" OF THE POSITION FOR WHICH I AM APPLYING. IF ANY ACCOMMODATION IS REQUIRED, I MUST MAKE THAT REQUEST PRIOR TO MY EMPLOYMENT START DATE. I UNDERSTAND THAT ANY MISREPRESENTATION, FALSIFICATION OR MATERIAL OMISSION OF INFORMATION DURING THE INTERVIEW OR ON THIS APPLICATION, MAY RESULT IN MY FAILURE TO RECEIVE AN OFFER OF EMPLOYMENT, OR, IF I AM HIRED, MAY RESULT IN MY EMPLOYMENT BEING TERMINATED BY THE BOARD. I UNDERSTAND THAT ANY RESULTS OF THE STATE OR FEDERAL BACKGROUND CHECKS WHICH MIGHT DENY ME EMPLOYMENT MAY BE FORWARDED TO THE STATE DEPARTMENT OF EDUCATION. I UNDERSTAND APPLICATIONS ARE KEPT ON FILE FOR A PERIOD OF ONE YEAR AND WILL REMAIN THE PROPERTY OF THE CENTRAL COMMUNITY SCHOOL SYSTEM, AND THIS CONSENT FOR RELEASE OF INFORMATION MAY BE USED AT ANY TIME DURING MY EMPLOYMENT WITH THE BOARD. I AGREE TO EXECUTE AN UPDATE CONSENT FORM IF THE BOARD DEEMS IT NECESSARY.

Date Signed: \_\_\_\_\_  
                    MONTH                    DAY                    YEAR

Applicant (Printed Name): \_\_\_\_\_

Applicant Signature: \_\_\_\_\_  
(Print this form and then sign in blue or black ink)