

Application for Employment with DANVILLE PUBLIC SCHOOLS

Danville School District #118
516 N. Jackson Street
Danville, IL 61832
Phone: (217) 444-1050
Fax: (217) 444-1052
Website: <http://www.danville.k12.il.us>

Application of:

Name _____
(First) (Middle) (Last) (Maiden)

Address _____
(Street) (City) (State/Zip) (County)

Telephone Number (_____) / _____ / SSAN # _____
(Home) (Work - Optional)

Permanent Address _____
(Complete only if above address is temporary)

E-mail address (optional) _____

Position applied for _____ Date available _____

Today's Date _____

Danville Community Consolidated School District #118 is interested in improving and maintaining the professional competencies for all classifications of employees.

Continuing participation in inservice education is a condition for employment in the District.

"An Equal Opportunity Employer"

**Complete this section only if applying for a
CERTIFIED POSITION**

(If employed, your certificate(s) must be registered in Vermilion County)

Major _____ Number of Hours _____ Minors _____ Number of Hours _____

Are you presently under a contract to teach? _____

If applying for a high school or middle school position, what subjects are you certified to teach in Illinois?

At what grade level did you student-teach? _____ Where? _____

Which extra-class activities (including intramurals and/or interscholastic athletics) will you be willing to direct?

Do you hold a valid Illinois Teaching Certificate? ____ Yes ____ No

If you have a valid Illinois Teaching Certificate, please complete the following information:

1. Type _____, Certificate # _____ 3. Type _____, Certificate # _____

2. Type _____, Certificate # _____ 4. Type _____, Certificate # _____

If no, when will you have your Illinois Teaching Certificate? Explain _____

Are you currently registered in Vermilion County? ____ Yes ____ No

**Complete this section only if applying for a
SUBSTITUTE TEACHING POSITION**

What is your preference for substituting? _____ Elementary (grades?) _____

_____ Middle School (subjects?) _____

_____ High School (subjects?) _____

Do you hold a valid Illinois Certificate? ____ No ____ Yes If yes, what type(s)? _____

____ Temporary Certificate number(s) _____

**Complete this section only if applying for a
CLERICAL POSITION**

Do you have computer experience? ____ No ____ Yes What software? _____

How many words per minute do you type? _____

Do you have any experience in: ____ General Bookkeeping/Accounting ____ Desktop Publishing ____

Business Correspondence ____ Word Processing ____ Spreadsheets ____

**Complete this section only if applying for a
TEACHER ASSISTANT POSITION**

Do you have a degree? ____ Yes ____ No If yes, what type? _____

If you do not have a degree, how many semester hour of college training do you have? _____

Do you have a Teacher's Aide certificate? ____ Yes ____ No

If permanent positions are not available, are you interested in substituting (teaching assistant)? ____ Yes ____ No

**Complete this section only if applying for a
CAFETERIA POSITION**

Do you have experience in quantity cooking? _____ Yes _____ No
Were you a kitchen manager? _____ Yes _____ No Were you a helper? _____ Yes _____ No
Would you be interested in working fewer than four (4) hours _____ Yes _____ No
Would you be interested in substituting? (on-call basis) _____ Yes _____ No
Do you have a current State of Illinois Food Handler's Sanitation Certificate? _____ Yes _____ No

**Complete this section only if applying for a
CUSTODIAL OR MAINTENANCE POSITION**

Can you work standing on a ladder or scaffold? _____ Yes _____ No
Can you do small maintenance repair jobs that are required around schools? _____ Yes _____ No
If permanent positions are not available, are you interested in custodial substituting? (on-call basis) ___ Yes ___ No

ALL APPLICANTS COMPLETE THIS SECTION

Give two (2) **work** references:

Name	Address	City	Telephone
_____	_____	_____	_____
_____	_____	_____	_____

Who should be notified in case of emergency?

Name	Address	City	Telephone
_____	_____	_____	_____

I understand that to be employed, I will be responsible for obtaining and must provide proof of a tuberculosis test and a physical examination approved by the Danville Public Schools stating my fitness for work. I understand this must be done within 90 days of employment and will be kept on file. I authorize all former employers and other persons to give any information they have regarding me, or my employment with them, and I release them and their companies from any liability for damages resulting therefrom. I understand that any false or misleading statements made by me on this application may prevent my employment or may be cause for dismissal if hired.

Date _____ Signature _____

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