

2nd most recent employer/position: Are you currently working for this employer? Yes No If yes, may we contact them? Yes No

EMPLOYER:	ADDRESS:	PHONE: () -
IMMEDIATE SUPERVISOR:	JOB TITLE:	DATES OF EMPLOYMENT FROM: TO:
BRIEF DESCRIPTION OF DUTIES:	REASON FOR LEAVING:	

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PROFESSIONAL REFERENCES These should be people qualified to give an honest appraisal of your character and job performance.

NAME	POSITION	LOCATION	PHONE NUMBER/EMAIL
1. _____			
2. _____			
3. _____			

ADDITIONAL INFORMATION This information will not be deemed part of the employment application for purposes of the Open Records Act. Answer ALL the following questions with a 'YES' or 'NO' answer in the appropriate space. Provide explanations for any 'YES' answer(s) on a separate page, including details of court name, location, and disposition of the event.

- Yes No 1. Have you ever been discharged, asked to resign from any position, or placed on a remediation plan?
- Yes No 2. Have you ever been convicted of/charged with a violation of law other than a misdemeanor traffic violation?
- Yes No 3. Have you ever been convicted of, pled guilty to, pled no contest to, or received a deferred sentence for a crime involving unlawful sexual behavior or other unlawful behavior toward a child?
- Yes No 4. If you hold, or held a Department of Education issued license/certificate, has your license/certificate ever been suspended or revoked?

**Did you answer all 4 questions? Did you provide your written explanation to any "YES" answers?
If missing, your application cannot be processed.**

I understand that I will need to be fingerprinted as I apply for certification in the State of Colorado. I hereby authorize an investigation and release of information concerning my past employment, activities and statements contained in this application. I waive my right of access to any such information and release from all liability and responsibility of all persons, companies or corporations supplying or receiving such information. I certify that all answers and statements contained herein are true, correct and complete and further, it is my understanding that any false statements or omissions made by me on this application or any supplement thereto, shall be grounds for failure to employ or dismissal should I be employed.

Signature of Applicant: _____ **Date:** _____

Note: Applications are kept on file for one year. After that time a new application should be submitted if you would like to be considered for future openings.

Mail your complete application packet to: Ronda Lancaster, Pleasant View Charter School 15328 Road CC
Pleasant View, CO 81331

Or email to: Ronda Lancaster at rlancaster@cortez.k12.co.us

Pleasant View Charter School is an equal opportunity and affirmative action employer and complies with Title IX and the Americans with Disabilities Act.

Pleasant View Charter School does not discriminate on the basis of race, color, sex, religion, national origin, ancestry, creed, age, marital status, sexual orientation, genetic information, disability, or need for special education services in admission or access to, or treatment of employment in its educational programs or activities.