

**HANOVER-HORTON SCHOOL DISTRICT**

10400 Moscow Road  
Horton, MI 49246  
(517) 563-0100

*APPLICATION FOR EMPLOYMENT – PROFESSIONAL STAFF*

This form must be filled out completely. All information will be treated in a confidential manner. Your application will be moved to the inactive file after one year unless renewed by you. It is your responsibility to provide transcripts of college credits and evidence of certification, as required by the position for which you have applied, prior to being considered for an interview.

***PERSONAL INFORMATION:***

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
                    Last                      First                      Middle

Address: \_\_\_\_\_  
                    Street                                      City                      State                      Zip

Phone: Home \_\_\_\_\_ Business \_\_\_\_\_ Cell \_\_\_\_\_

***POSITION DESIRED:***

For which position are you applying: Elementary \_\_\_\_\_ Middle School \_\_\_\_\_ High School \_\_\_\_\_

Other (Counseling, special education, administration, etc.): \_\_\_\_\_

***EMPLOYMENT INFORMATION:***

Please list teaching certificates held, including endorsements and MTTC information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently under contract? \_\_\_\_\_ If yes, when does it expire? \_\_\_\_\_

May we contact your present employer? \_\_\_\_\_ Name \_\_\_\_\_

Position \_\_\_\_\_ Phone Number \_\_\_\_\_

Have you obtained tenure status in a Michigan school district? \_\_\_\_\_ If yes, where?  
\_\_\_\_\_ When? \_\_\_\_\_

Have you ever been denied tenure? \_\_\_\_\_ If yes, Where? \_\_\_\_\_

Why do you wish to leave your present position? \_\_\_\_\_

**EDUCATION BACKGROUND:**

Name	Institution Location	Degree Received	Dates Attended	GPA	Major	Minor

High School: \_\_\_\_\_

Under Graduate Work: \_\_\_\_\_

Graduate Work: \_\_\_\_\_

Awards, honors or special recognition received in college \_\_\_\_\_

**WORK EXPERIENCE IN EDUCATION:**

Name	School Location	Position	From/To Dates	Reason for Leaving	Last Salary

Total number of years of full-time teaching experience excluding student teaching? \_\_\_\_\_

**OTHER WORK EXPERIENCE (INCLUDING MILITARY):**

Name	Company Location	Position	From/To Dates	Reason for Leaving	Last Salary

**MEMBERSHIPS IN PROFESSIONAL ORGANIZATIONS AND VOLUNTARY WORK WITH STUDENTS, PAST AND PRESENT:**

Organizations	Dates

Hobbies and special interests: \_\_\_\_\_

Are you interested in coaching? \_\_\_\_\_ If yes, which sports? \_\_\_\_\_

List extra-curricular activities you would be interested in directing: \_\_\_\_\_

\_\_\_\_\_

**Notice of Handicapper Rights**

Michigan law requires that you notify the Hanover-Horton School district in writing within 182 days after you know or should have known that an accommodation for a handicap will be necessary to permit you to perform the duties of the position for which you are applying.

**Notice of Medical Examination**

Any job you are offered by Hanover-Horton Schools will be conditional on the results of a medical examination if one is requested by Hanover-Horton Schools. The medical exam will be completed before you begin work on your job.

## APPLICANT'S CERTIFICATION AND AGREEMENT

Read the following carefully before signing this application for employment

1. **Certification of Truthfulness:**  
I certify that all statements on this Application for Employment are made truthfully and without evasion, and further understand and agree that such statements may be investigated and if found to be false, will be sufficient reason for not being employed or if employed, may result in my dismissal.
2. **Authorization for Employment Information:**  
I authorize Hanover-Horton School District to conduct an investigation of me, including but not limited to all statements made by me in this application. I authorize all sources of information (the references I have listed, any prior or current employer of mine, and educational institutions) or anyone else contacted by Hanover-Horton School District to give it any and all information concerning me and my previous employment or educational accomplishments, including any disciplinary information and any other information from all liability for any damage that may result from furnishing information to Hanover-Horton School District. Also, I hereby waive written notice to me that employment information is being provided by any person or organization. A copy of this Authorization, Release and Waiver shall be considered as effective and valid as the original.
3. **Physical Examination and Testing:**  
I agree to submit, upon request, for physical examination by the district's physician and to execute appropriate releases for that purpose. In addition, I agree to submit to a pre-employment substance-screening test and to all searched and substance testing called for by the District's Substance Abuse Policy. I also agree to participate in any aptitude or other testing the district believes will assist in hiring or placement decisions.
4. **Criminal Records Check:**  
I agree to execute an authorization for this employer to secure criminal conviction history and a record of referrals to first offender programs from the appropriate law enforcement agency, should the board determine it is necessary to do so.

---

Applicant's Signature

Date

Hanover-Horton School District is an equal opportunity employer.

Return application and all materials to:

John Denney, Superintendent  
Hanover-Horton School District  
10400 Moscow Road  
Horton, MI 49241  
(517) 563-0100

## CRIMINAL HISTORY CONVICTION STATEMENT

Pursuant to 1993 Public Act 68, I, \_\_\_\_\_ represent that (check one):

\_\_\_\_\_ I have not been convicted of, or pled guilty or nolo contendere (no contest) to any crime.

\_\_\_\_\_ I have been convicted of, or pled guilty or nolo contendere (no contest) to the following crimes  
(use separate sheet to explain nature of conviction, date and court):

a. \_\_\_\_\_

b. \_\_\_\_\_

I understand and agree the pursuant to 1993 Public Act 68:

The board of education of the school district or governing body of the school must request a criminal history check on me from the Central Records Division of the Michigan State Police;

- a. The board of education of the school district or governing body of the school must request a criminal history check on me from the Central Records Division of the Michigan State Police.
- b. Until that report is received and reviewed by the school, I am regarded as a conditional employee; and
- c. If the report from the Department of State Police is not the same as my representation(s) above respecting either the absence of any conviction(s) or any crimes of which I have been convicted, my employment contract is voidable at the option of the school district.

My driver's license number is \_\_\_\_\_.

My date of birth is \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date