



American Heritage Charter School
Employment Application

American Heritage Charter School complies with all federal, state, and local employment laws. We are an equal opportunity employer and all positions are filled without regard to race, color, religion, sex, national origin, age, or individuals with disabilities. AHCS gives preference to veterans fitting the requested hiring criteria.

In order to be considered for employment at American Heritage Charter School, please complete the following application and submit to: Administrator, 1736 S. 35th W., Idaho Falls, Idaho 83402 or e-mail to: clerk@ahcspatriots.us.

A criminal history check completed by the Idaho State Department of Education is required by Idaho law (Idaho Code § 33-130). All offers of employment are contingent upon the results of a background investigation check. All adults working in Idaho public schools (certificated and non-certificated), or applying for certification, are currently required to have the results of a background investigation check on file with the State Department of Education. This process includes:

1. Being fingerprinted on a State Department of Education fingerprint card;
2. Submitting fingerprint card & fee of \$40 to the Office of Certification (AHCS will reimburse the fee upon official hire). Check is conducted through: (1) Idaho Bureau of Criminal Identification (BCI); (2) Federal Bureau of Investigation (FBI) background investigation check; (3) Statewide Sex Offender Register; and
3. Clearing the criminal background check (no felonies as noted in section 33-130, Idaho Code).

Full Name: _____
Last First M. I. Date

Physical Address: _____
Street Apartment #

City State Zip Code

Mailing Address: _____
(If different from physical address listed above)

Home Phone: _____ Cell Phone: _____ Other: _____

E-mail: _____ Date Available for Work: _____

Position Applying for

First Choice: _____ Second Choice: _____

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the United States? Yes No

Have you worked for this school district? Yes No

If so, give dates of employment. _____

Have you ever been convicted of a criminal offense? Yes No If yes, explain.



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EDUCATION

Describe your computer skills. Please include the programs in which you have skill and the level of skill you have attained, e.g., beginner, intermediate, advanced.

List any certifications you might hold and describe what the certification means to your skill set.

Institution	Name/Address	From	To	Date Graduated	Degree Earned
High School					
College					
College					
College					

Additional Training:

Honors and Special Awards:

Military Service

Branch of Military: _____ Rank: _____

Service Dates: _____ Type of Discharge: _____



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PERSONAL DATA

Please provide any personal data which you think will be of assistance in evaluating your application.

American Heritage Charter
School 1736 S. 35th W.
Idaho Falls, Idaho 83402

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, do hereby authorize the authorities of American Heritage Charter School, Idaho Falls, Idaho, to make inquiry of my present and past employers and/or professional associates, regarding my job performance and/or job-related conduct.

Exceptions, if any, are:

Signature of Applicant

Date



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PREVIOUS EMPLOYMENT (List all employment beginning with most recent. Include periods of unemployment or self-employment. If additional space is needed, attach a separate sheet.)

Current or Last Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No



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Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Address

Job Title	Name of Supervisor	Phone

Duties and Responsibilities	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No



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DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that any employment relationship with American Heritage Charter School is of an “at will” nature, which means the employee may resign at any time and the employer may discharge employee at any time with or without cause. It is further understood that the nature of this “at will” employment relationship may not be changed by any act unless such change is specifically acknowledged in writing by the Board of Trustees of AHCS.

If this application leads to employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules, regulations, and policies of the school.

Signature of Applicant

Date



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This is an employment verification form. Please fill out the applicant portion (top section) completely, and return this form with your application. American Heritage Charter School will mail the form to your previous employer(s).

I, _____, authorize my former employer to furnish the information requested to American Heritage Charter School.

Employer Name _____

Address _____

Employer Phone Number _____ Employer Fax Number _____

Employer E-mail Address _____

Name of Applicant at Time of Employment: _____

Social Security Number _____ Dates of Employment: From _____ To _____

Position at Time of Separation: _____ Supervisor: _____

Previous employer: Please complete the following section.

Experience Verification

The person described above has applied to AHCS for employment consideration. AHCS has been authorized by the applicant to receive information concerning personal character, work habits, and employment records.

_____ was employed by _____ in the

Applicant Name

Previous Employer

position of _____ from _____ to _____

Job Title

Dates of Employment

for a total of _____ of employment.

(Yrs/Mths)

Name and title of person completing this form: _____

Company and/or School Name: _____

Address, City and State: _____

Signature: _____ Date of Signature: _____

Please return to:

American Heritage Charter School
1736 S. 35th West
Idaho Falls, Idaho 83402

TO: _____
Director of Certification/Professional Standards
Idaho State Department of Education
P.O. Box 83720
Boise, Idaho 83720-0027

FROM: Administrator, American Heritage Charter School

RE: Request for Verification of Certificate Status

Pursuant to § 33-1210(5), Idaho Code, American Heritage Charter School, is seeking information regarding the following individual:

Name of Applicant: _____
(Clearly print your name)

Applicant Date of Birth: _____
(Print your date of birth)

Specifically, pursuant to the above-referenced statute, American Heritage Charter School, is seeking the following information in order to address a hiring decision:

1. Certificate status.
2. The existence of any past findings or complaints relating to violations of the Code of Ethics for Professional Educators.
3. The existence of any current complaints or investigations relating to alleged violations of the Code of Ethics for Professional Educators.
4. Any information relating to job performance as defined by the State Board of Education, pursuant to Subsection (11) of Idaho Code § 33-1210, for any applicants for certified employment.

American Heritage Charter School would greatly appreciate it if this information could be advanced to the attention of the Administrator on or before the _____ day of _____, in order to allow a timely decision as to employment matters. This information may be mailed to:

1736 S. 35th W.
Idaho Falls, Idaho 83402

or send via e-mail to clerk@ahcspatriots.us.