

CHICO UNIFIED SCHOOL DISTRICT
1163 E. 7th Street Chico, CA 95928

CLASSIFIED EMPLOYMENT APPLICATION
SUBSTITUTE

Chico Unified School District is an affirmative action employer and will not discriminate against employees or discriminate in employment of classified personnel with regard to race/color, religious creed, national origin/ancestry, age, mental or physical disability, sex, sexual orientation, gender identity, veteran status, marital status, or medical condition.

Please return the completed application by mail or in person to:
Classified Human Resources Office
Chico Unified School District
1163 E. 7th Street, Room 3
Chico, CA 95928

All information requested on the application form must be completed accurately. If you have trouble completing the application, ask the office staff for assistance.

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LAST NAME	FIRST NAME	MI	HOME PHONE	CELL PHONE
<hr/>			<hr/>	
MAILING/STREET ADDRESS			EMAIL	
<hr/>			<hr/>	
CITY	STATE	ZIP	CLASSIFICATION FOR WHICH YOU ARE APPLYING	
<hr/>			<hr/>	

PART 1 – PERSONAL HISTORY

Have you been convicted of a crime? (Conviction shall mean a plea, verdict, or finding of guilt regardless of whether sentence is imposed by the court. Conviction shall not include an arrest or detention that did not lead to a conviction, but rather to referral to and/or participation in any pretrial or post trial diversion program.)

Omit (1) minor traffic offenses; and, (2) minor marijuana convictions over two years old (convictions for violations of Health and Safety Code sections 12357(b) or (c), 11364, 11365 or 11550 or statutory predecessors, as they related to marijuana)

[] Yes [] No (If yes, please explain) _____

Are you currently out on bail or on your own recognizance pending trial? [] Yes [] No (If yes, explain below)

Do you have any physical or mental condition that may limit your ability to perform any of the duties set forth in the job description for the position for which you are applying? [] Yes [] No (If yes, explain what the District could do to accommodate any such limiting factor)

Do you need a reasonable accommodation to participate in the hiring process? [] Yes [] No (If yes, explain what the District could do to accommodate you)

Are you over 18 years of age? [] Yes [] No If no, can you submit a work permit after you are hired? [] Yes [] No

PART 2 – RELEVANT EDUCATION/TRAINING

Instructions: The District wants to know about any education and/or training you possess that has helped develop your knowledge and skills required for the classification for which you are applying. List all related training, i.e.: military, business schools, formal college course work, training seminars, self-taught, on-the-job, formal or informal, etc. Attach pages if needed for additional education. Also, list any pertinent licenses or certificates you possess related to or required by this job classification.

A. School/College/Organization Attended _____

Address _____

Dates attended: _____ Graduated: [] Yes [] No Course/Class/Seminar Titles: _____

B. School/College/Organization Attended _____

Address _____

Dates attended: _____ Graduated: [] Yes [] No Course/Class/Seminar Titles: _____

C. License(s)/Certificate(s) – Based on the classification for which you are applying, please attach copies of relevant licenses and/or certificates.

PART 3 – RELEVANT EMPLOYMENT EXPERIENCE

Instructions: Give complete information for each previous employment (full-time, part-time, paid, unpaid, and/or volunteer) pertinent to the classification for which you are applying. Your thoroughness in providing this information will be of benefit to you during the selection process. Use additional pages if needed.

A. Employer _____ Address _____

Job Title _____ Start Date _____ End Date _____

Reason for Separation _____ Hrs/Week _____

Supervisor's Name/Work Phone Number _____

☐ Current Employer ☐ Please don't contact (If selected, please provide the name & phone number of a previous supervisor or co-worker on a separate piece of paper who can be contacted as a Professional Reference.)

Describe typical tasks/duties you performed, knowledge/skills required, as completely and concisely as possible.

B. Employer _____ Address _____

Job Title _____ Start Date _____ End Date _____

Reason for Separation _____ Hrs/Week _____

Supervisor's Name/Work Phone Number _____

☐ Current Employer ☐ Please don't contact (If selected, please provide the name & phone number of a previous supervisor or co-worker on a separate piece of paper who can be contacted as a Professional Reference.)

Describe typical tasks/duties you performed, knowledge/skills required, as completely and concisely as possible.

Please tell us how you heard of this substitute recruitment: ☐ Butte College ☐ CSU, Chico ☐ CUSD Employee ☐ Ed-Join
☐ Employment Development Dept ☐ Other

Please provide the days/hours you are available to work: ☐ Monday _____ ☐ Tuesday _____ ☐ Wednesday _____
☐ Thursday _____ ☐ Friday _____

Upon Employment are you willing to:

☐ Yes ☐ No Provide a fingerprint report through the Department of Justice?
☐ Yes ☐ No Provide a current interdermal or x-ray tuberculin report?
☐ Yes ☐ No For purposes of substituting, have your home telephone released to CUSD employees?

PLEASE REVIEW YOUR APPLICATION THOROUGHLY.
YOU WILL NOT BE ALLOWED TO MAKE CORRECTIONS AFTER THE FILING DEADLINE.

My submission of this application authorizes the school to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local law enforcement agencies, information from the Central Criminal Records Exchange or either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the California or other State Department of Social Services Child Protective Services Unit and any locality to which they may refer for release of information to any findings of child abuse or neglect investigations involving me.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or falsely answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Signature

Date

PLEASE PROVIDE THREE REFERENCES THAT WE CAN CONTACT. IF YOU CANNOT PROVIDE WORK REFERENCES, WHICH ARE PREFERRED, PLEASE USE INDIVIDUALS TO WHICH YOU ARE NOT RELATED AND HAVE KNOWN AT LEAST ONE YEAR.

1.

NAME _____

JOB TITLE/RELATIONSHIP _____

CONTACT NUMBER _____

HOW DOES THIS PERSON KNOW YOU? _____

2.

NAME _____

JOB TITLE/RELATIONSHIP _____

CONTACT NUMBER _____

HOW DOES THIS PERSON KNOW YOU? _____

3.

NAME _____

JOB TITLE/RELATIONSHIP _____

CONTACT NUMBER _____

HOW DOES THIS PERSON KNOW YOU? _____
