

CALCASIEU PARISH SCHOOL BOARD
3310 BROAD STREET
P O Box 800
Lake Charles, LA 70602-0800

APPLICATION FOR CLERICAL POSITION

LAST NAME FIRST NAME

PLEASE PRINT

Please Print:

NAME _____
LAST FIRST MIDDLE MAIDEN

MAILING ADDRESS _____

CITY, STATE, ZIP _____

SOCIAL SECURITY NO _____ PHONE NUMBER _____

ALTERNATE ADDRESS _____

CITY, STATE, ZIP _____

ALTERNATE PHONE NUMBER _____

HAVE YOU EVER BEEN CONVICTED OF, OR PLEAD NOLO CONTENDERE TO, CRIMES
OUTLINED IN STATE LAW? _____ Yes _____ No

EDUCATIONAL PREPARATION:

Have you earned a high school diploma? _____

What school granted the diploma? _____

When was the diploma earned? _____

Did you attend a post-secondary school? _____

What institution did you attend? _____

When did you attend the institution? _____

How many credit hours did you earn? _____

Did you complete the program of study? _____

Were you granted a degree? _____

When were you granted the degree? _____

Was the curriculum a one, two, or four year program? _____

What was your major area of study? _____

SKILL AREAS:

Typing WPM _____ Machine Proficiency - Please List

Shorthand WPM _____

Accounting - No. of Courses _____

Bookkeeping - Yrs of experience _____

Data Entry Rate _____

Other _____

CALCASIEU PARISH DRUG FREE WORKPLACE POLICY

YOU ARE HEREBY NOTIFIED that it is a violation of the policy of the Calcasieu Parish School Board for any employee to unlawfully manufacture, distribute, dispense, possess or use on or in the workplace any narcotic drug, hallucinogenic drug, amphetamine, barbiturate, marijuana or any other controlled substance, as defined in Schedule I through V of Section 202 of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation at 21 CFR 1308.11 through 1308.15. **Drug Testing is a requirement for all new employees of the Calcasieu Parish School System.**

"*Workplace*" is defined as the site for the performance of work done in connection with an activity under the auspices of the School Board. That includes a school building or other school premises; any school-owned vehicle or any other school-approved vehicle used to transport students to and from school or school activities; off-school property during any school-sponsored or school-approved activity, event or function, such as a field trip or athletic event, where students are under the jurisdiction of the School Board.

YOU ARE FURTHER NOTIFIED that it is a condition of your continued employment that you will comply with the policy of the School Board and will notify your supervisor of your conviction of any criminal drug statute for a violation occurring in the workplace, no later than five (5) days after such conviction.

Any employee who violates the terms of the School Board's drug-free workplace policy may be non-renewed or his or her employment may be suspended or terminated, at the discretion of the Board.

Sanctions against employees, including non-renewal, suspension and termination shall be in accordance with administrative regulations and procedures as prescribed in Section GBK and related sections of the Calcasieu Parish School Board Policy Manual.

I, _____, have read the above and understand that a copy will be placed in my personnel folder.

Signature

Date



**DISCLOSURE AND RELEASE STATEMENT REGARDING
SEXUAL MISCONDUCT**

I hereby swear or confirm that I have never committed any acts that resulted in an investigation by a previous employer or law enforcement agency relating to or involving sexual misconduct with minors or other co-workers.

I authorize the disclosure of information from any current or previous employer of mine, if such employer is/was a city, parish, or other local school board, relative to all instances of sexual misconduct with students committed by me, if any. I expressly give consent for the release of such information from any school employee and/or teacher personnel file maintained with respect to me. I release and hold harmless my current or previous employer, if employer is/was a city, parish, or other local school board, and any employee acting on behalf of such employer from any liability for providing any information relative to all instances of sexual misconduct with students committed by me, if any.

Name of Applicant (Please Print)

Social Security Number

Signature of Applicant

Date

THIS SECTION TO BE COMPLETED BY PREVIOUS EMPLOYER

Name of School System: _____

There is no information in this employee's file indicating sexual misconduct.

I have attached documentation regarding sexual misconduct.

Signature (Human Resources Administrator)

Date

Please return to:

**Calcasieu Parish School System
P O Box 800
Lake Charles, LA 70602-0800**

All children are important to us.