



320 North 5th Street
Beatrice, NE 68310
(402) 223-1500

Application for Substituting

Date: _____

Name: _____
First Middle Last

Address: _____
Street City State Zip

Phone: _____
Home Work or other

Social Security Number ____ / ____ / ____

PART A

If any of the information requested in Part A is on your resume you do not need to duplicate the information.

PROFESSIONAL PREPARATION

Institution & Location	Dates Attended	Major Field(s)	Degree Earned

PROFESSIONAL EXPERIENCE

Dates	Institution & Location	Position	Salary

PART B

All items in Part B need to be completed.

REFERENCES

Please provide the names of four persons who are aware of your work record and who could provide insight into your abilities as a substitute.

Name	Address	Occupation/Position	Phone

Have you ever been found guilty of a felony or misdemeanor or entered a plea of guilty or no contest to a felony or misdemeanor? Minor traffic violations need not be reported. _____ Yes _____ No

If your answer is yes, please give details.

Have you ever been employed with us before? _____ Yes _____ No

If yes, give date: _____

Have you been involuntarily released from a teaching or administrative contract? _____ Yes _____ No

If your answer is yes, please give details. _____

Are you a citizen of the United States of America? _____ Yes _____ No

I authorize any educational institution, government unit or other person or entity having any records of information concerning me to furnish such records or information requested by Beatrice Public Schools or their duly authorized representatives. I understand in executing this authorization I waive the right for such information to be privileged or private.

I certify that to the best of my knowledge all information is correct and all statements true. I understand that false statements or withheld information shall disqualify me from employment and if employed by Beatrice Public Schools would be grounds for dismissal.

Signature of Applicant

Date

Please ensure you send resume, transcripts, copy of teaching certificate, and credentials.

NOTICE OF NONDISCRIMINATION - Beatrice Public Schools District 15 does not discriminate on the basis of race, color, national origin, sex, disability, martial status or age in admission or access to, or treatment of employment in, its programs and activities. If you feel you have been discriminated against, or have inquiries regarding grievance activities or compliance with Title IX, Title VI or Section 504, contact the Superintendent of Schools, Jason Alexander, Beatrice Public Schools, 320 North Fifth Street, Beatrice, NE 68310 (402)223-1500.

SUBSTITUTE PROFILE

Please print.

First Name:	Last Name:
Social Security Number:	Telephone Number:
Month/Date of Birthday:	
E-mail Address:	
Address:	
City/State:	ZIP Code:

Indicate with a checkmark the subjects/positions for which you are qualified to be a substitute.

<input type="checkbox"/> Paraprofessional	<input type="checkbox"/> Teaching Certificate
<input type="checkbox"/> Special Education Paraprofessional	<input type="checkbox"/> Local Substitute Certificate
<input type="checkbox"/> Office (Paraprofessional)	



Jason Alexander
Superintendent

Dr. Jackie Nielsen
Assistant
Superintendent

David Koch
Director of
Technology

Beth Cordry- Hookstra
Director of
Special Education

Terry Brethouwer
Director of Buildings
& Grounds

CONSENT TO PROVIDE EMPLOYMENT HISTORY TO BEATRICE PUBLIC SCHOOLS

I, _____ (applicant), hereby give consent to any and all current and prior employers of mine to provide information with regard to my employment with current or prior employers to Beatrice Public Schools (prospective employer).

I consent to my current and prior employers giving the following information about me to Beatrice Public Schools:

1. Date and duration of employment;
2. Pay rate and wage history on the date of receipt of this consent;
3. Job description and duties;
4. The most recent written performance evaluation prepared prior to the date of the request for information and provided to me during the course of my employment;
5. Attendance information;
6. Results of drug or alcohol tests administered within one year prior to the request for information;
7. Threats of violence, harassing acts, or threatening behavior related to the workplace or directed at another employee;
8. Whether I was voluntarily or involuntarily separated from employment and the reasons for the separation; and
9. Whether I am eligible for rehire.

The consent is valid for six months from the date of my signature below.





APPLICANT DISCLOSURE AND AUTHORIZATION FORM

[IMPORTANT -- PLEASE READ
CAREFULLY BEFORE SIGNING
AUTHORIZATION]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

[Employer] ("The Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history including current position, worker's compensation injuries, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report conducted by [One Source The Background Check Company, PO Box 24148, Omaha, NE 68124, 1.800.608.3645, www.onesourcebackground.com]. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manners of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

PLEASE PRINT LEGIBLY

Last Name: _____ First Name: _____ Middle: _____

Other Names/Alias: _____

*Social Security #: _____ Date of Birth(MM/DD/YYYY): _____

Driver's License #: _____ State of Driver's
License: _____

Present Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email Address: _____

All Previous Addresses in the Last Seven Years

Signature: _____ Date: _____

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau,
1700 G Street N.W., Washington, DC 20552.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
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- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact: