



WASHOE COUNTY SCHOOL DISTRICT
HUMAN RESOURCES DIVISION

APPLICATION FOR CERTIFIED HOURLY ASSIGNMENT

This application will be used when hiring any certified employee in an hourly teaching or extra duty assignment. Please complete this application so that a determination can be made of the employee's occupational qualifications for this position.

If you need assistance during any step of the application and/or hiring process, please notify a representative from the Human Resources Division in advance by calling (775) 348-0321.

SCHOOL/DEPARTMENT TO COMPLETE THIS SECTION

Form fields for School/Department, Signature of Principal or Program Coordinator, Start Date, End Date, Description of work to be performed, Duration of Position, Core Subject? Yes/No, If YES, what subject?

If this assignment is for extra contract days for a current teacher, do you expect this duty to recur as a standard practice? Yes/No

Note: If not part of the original employment contract as a standard practice, the earnings are not subject to PERS contributions.

Form fields for Funding Source, Account Number, Rate of Pay, Please Check One: Hourly/Daily, HR Licensing, Orgkey/Object:

APPLICANT INFORMATION

Form fields for Last Name, First Name, Middle Name, Other Names Used, Social Security Number, Address, City, State, Zip, Home Phone, Best Time to Call, Work Phone, Best Time to Call

Are you currently employed by WCSGD? Yes/No Current Position/Location: /

Are you currently licensed to teach in Nevada for the position for which you are applying? Yes/No

Please attach a copy of your Nevada Teacher License.

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING AND DATING THIS APPLICATION

I hereby certify that all information provided by me on this employment application and all other information provided by me in the course of applying for employment at Washoe County School District (WCSGD) is truthful, accurate, and complete. I understand that if any information provided by me on this employment application or any other information provided by me in the course of applying for employment at WCSGD is found to be false, untruthful, misleading, or incomplete that such will be cause for immediate rejection of my application for employment. I further understand that if I am hired as an employee of WCSGD and at any time thereafter it is discovered that any information provided by me on this employment application or any other information provided by me in the course of applying for employment at WCSGD is found to be false, untruthful, misleading, or incomplete shall be sufficient cause for disqualification or dismissal from employment.

I hereby authorize WCSGD to obtain information relating to my current and previous employment, education, criminal or personal history records. I agree to release the WCSGD, its employees, representatives and agents from any and all liability claims and damages for the obtaining and use of information received from these sources or developed as a result of contacting these sources.

I hereby authorize any and all organizations, including but not limited to my current or previous employers, educational institutions, etc., their employees, representatives and agents to provide any and all information regarding my employment or education to WCSGD, its employees, representatives and agents requesting such information. In addition to authorizing the release of any information regarding my employment or education, I hereby fully waive any rights or claims I have against said organizations, its employees, representatives and agents from any and all liability claims or damages that may directly or indirectly result from the use, disclosure, release or omission of any such information by any person or party, whether such information is favorable or unfavorable to me. A photocopy of this release will be valid as an original even though the photocopy does not contain an original writing of my signature.

I hereby certify that I have read and understand the above.

Form fields for Applicant's Name (Please Print), Applicant's Signature, Date

NON-DISTRICT APPLICANTS MUST COMPLETE PAGE 2 OF THIS FORM

Position Control:



**MUST BE COMPLETED BY NON-DISTRICT APPLICANTS**

\_\_\_\_\_  
Current Employer                      Address                      City                      State                      Zip  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Dates of Employment From \_\_\_\_\_ to \_\_\_\_\_

**PAST EXPERIENCE RELATED TO THIS POSITION:**

\_\_\_\_\_  
Employer                      Address                      City                      State                      Zip  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Dates of Employment From \_\_\_\_\_ to \_\_\_\_\_

**REFERENCES** (Please list four (4) references who are familiar with your work experience):

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**EDUCATION:**

\_\_\_\_\_  
College/University                      Degree                      Major                      Minor  
\_\_\_\_\_  
College/University                      Degree                      Major                      Minor

**PREVIOUS RESIGNATION/DISMISSAL INFORMATION**

If you have been dismissed, terminated, asked to resign, or asked to resign in lieu of discipline by a previous (or current) employer, or if you are under investigation by your current employer for possible disciplinary action, a full and complete explanation must be addressed to the attention of the Assistant Superintendent of Human Resources. Please place your written explanation in a sealed envelope and attach it to your application.

**ARRESTS/CONVICTIONS**

In answering the following questions, be advised that if you are offered employment with the WCSD, a set of your fingerprints will be taken and will be forwarded to the Federal Bureau of Investigation (FBI) for processing. The District will then receive a report from the FBI which will contain a complete listing of any arrest and/or conviction that is on your FBI criminal history file. It is essential, therefore, that you answer each question with complete honesty. If you are unsure about a past event, you should list it. Please note that a yes answer to these questions may not necessarily disqualify you from consideration for employment. The WCSD will consider the nature and date of the conviction, your intervening conduct, and the relationship between the conviction and the position for which you are applying.

Have you ever been CONVICTED of any criminal offense other than a minor traffic violation (this includes, but is not limited to a felony, gross misdemeanor, misdemeanor, DUI, etc.)? Conviction means the final judgment of a verdict or a finding of guilty, plea of guilty, or a plea of nolo contendere in any court, regardless of whether an appeal is pending or could be taken.

Yes (please initial) \_\_\_\_\_  No (please initial) \_\_\_\_\_

Do you have any outstanding arrests for which you are awaiting trial or for which a final judicial determination has not been made?

Yes (please initial) \_\_\_\_\_  No (please initial) \_\_\_\_\_

If YES to EITHER of the above questions, you must complete and include a CONVICTION INFORMATION FORM. Failure to do so may result in the rejection of your application.

Have you ever had any credential or driver's license suspended or revoked?

Yes (please initial) \_\_\_\_\_  No (please initial) \_\_\_\_\_

If yes, please explain and include applicable dates:

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