

**U.S.D. #249 FRONTENAC SCHOOLS  
SUBSTITUTE TEACHING APPLICATION**

Date of Filing Application: \_\_\_\_\_

Name in Full: \_\_\_\_\_

Present Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Substitute Position Desired (Days of the week and grades levels): \_\_\_\_\_

Do You Hold A Teaching License: \_\_\_\_\_ If yes, what type: \_\_\_\_\_  
(Please attach a copy of your License)

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, explain: \_\_\_\_\_

**SCHOOLS ATTENDED (List Most Recent First)**

Name of School	Dates	Diploma/Degree	Major	Minor
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**EMPLOYMENT RECORD (List Most Recent First)**

Name of Employer	Location	Position	Dates Inclusive
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**REFERENCES**

Name	Address	Phone Number	Official Position
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## APPLICANT JOB APPLICATION ACKNOWLEDGMENTS

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3. I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.
4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

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Signature of Applicant

Date

# Employment Disclosure and Authorization for Background Check

## Section I: Disclosure

Frontenac Public Schools USD 249, may request background information about you from a consumer reporting agency in connection with your employment application and for employment purposes. The report ordered is defined by the Fair Credit Reporting Act (FCRA) as a consumer report, and all inquiries are limited to information that affects job performance and the workplace. It is conducted in accordance with applicable federal and state laws including the FCRA. The screening will be conducted by an outside agency- National Screening Bureau LLC- Address 515 N Ridge Rd, Ste 202 Wichita, KS 67212 [Phone: 1-877-263-4405] [Fax: 316-223-1094] As a result, National Screening Bureau may obtain a consumer report on you as an applicant or during employment.

A Consumer report is a compilation of information that might affect your employability. The scope of the report may include information concerning your driving record, civil and criminal court records, credit, drug screening results, worker's compensation records, education, credentials, identity, past addresses, Social security number, previous employment and personal references. Should an employer rely on a consumer report for an adverse action, the FCRA mandates you be provided with a copy of the consumer report and a summary of your rights. An adverse action is defined as "a denial of employment or any other decision for employment purpose that adversely affects and current prospective employee."

## Section II: Authorization and Release

I have carefully read and understand this Disclosure, Authorization and Consent for the procurement of consumer reports form and the summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, National Screening Bureau, LLC., to the company and its designated representatives and agents. I authorize the company to share the contents of this consumer report or investigative consumer report with its partners and clients in an effort to place me into an employment/independent contractor relationship with those partners. I understand that if the company hires me, my consent will apply, and the company may obtain reports, throughout my employment. I also understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative consumer reports. By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle record agencies, my past and present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency. By my signature below, I certify the information I provided on this form is true and correct and will be valid for any reports that may be requested by or on my behalf of the company.

Applicant Name:

Applicant Signature:

Date:

**California, Minnesota or Oklahoma applicants only:** check this box to receive a free copy of any Consumer Report, Investigative Consumer Report or Credit Report from National Screening Bureau electronically. For a paper copy, contact National Screening Bureau at 1-877-263-4405 or support@natsb.com.

*Para informacion en espanol, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore)  
o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 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 the FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 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 will be 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](http://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](http://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](http://www.consumerfinance.gov/learnmore).

## Applicant Information Form

Last name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Other Names Used (Including Maiden Name) \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Email Address \_\_\_\_\_

Sex (Please circle) M F Race \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_

State Driver's License was issued in: \_\_\_\_\_

I understand that information in this form will be used for the purposes of running a background check. I have signed the Authorization and disclosure form. I understand this is **not** the authorization and disclosure form and that All information obtained from this form, specifically Date of Birth, sex, and race are being requested only for purposes of identification in obtaining accurate retrieval of information.

I certify the information I provided on this form is true and correct.

Name (Please Print) \_\_\_\_\_

Signature \_\_\_\_\_ Todays Date \_\_\_\_\_

- This form is for collection of information needed for a background check and does not need to be uploaded.