



**GATES COUNTY BOARD OF EDUCATION**  
**P. O. BOX 125**  
**GATESVILLE, NC 27938**  
**TELEPHONE : 252-357-1113**

**Position applying for :** \_\_\_\_\_

1. Applicants should direct inquiries, letters of recommendation, confidential placement files, transcripts and completed applications to the Human Resources Department.
2. Original transcripts must be provided if required for position.
3. A minimum of one (1) written letter of recommendation is required.
4. Applicants may attach additional pages if there is insufficient space to answer question(s).
5. Application includes Voluntary Equal Employment Opportunity Identification (copy attached).
6. Application includes Disclosure & Authorization regarding background check (copy attached).
7. Applications will remain on file for one year.
8. If you have questions please contact:

Barbara Knight, Human Resources Assistant  
252-357-1113 (Ext. 32)

**I. Personal Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

## II. Qualification Questions:

1. Can you perform all the essential job functions of the position for which you are applying with or without reasonable accommodation?
  - a. YES
  - b. NO
2. Does your name appear on any Sex Offender Database in any state or country?
  - a. YES
  - b. NO
3. Do you have any criminal charges or procedures pending?
  - a. YES
  - b. NO
4. Have you ever been asked to resign from a position of employment?
  - a. YES
  - b. NO
5. Have you ever been convicted or pleaded nolo contendere (no contest) to any violation of the law other than a minor traffic ticket?
  - a. YES
  - b. NO
6. Have you ever been subject to disciplinary action during a period of employment?
  - a. YES
  - b. NO
7. Have you ever been suspended, dismissed, fired, or discharged from a position of employment?
  - a. YES
  - b. NO

## III. Education

School	Years Attended	Name and Location of Institution	Degree	Date

**Note:** For any college or university credits, please provide a transcript. An original transcript will be required for a personnel file.

## IV. Community Activities:

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**V. Work History (list in order of most recent first)**

Dates From To	Name & Address of Employer	Rate of Pay	Supervisor's Name and Title	Reason for Leaving

**VI. Briefly describe any special trainings or certifications that are applicable:**

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**VII. References**

Name	Relationship (professional, personal)	Contact Information (phone number)	Approval to Contact	
			YES	NO
			YES	NO
			YES	NO

## **Applicant's Certification & Release of Liability**

I, the applicant/employee, by submission of this application certify that I hereby expressly authorize the Board of Education, its agents, and its employees to make any investigation of my personal or employment history, expressly including, but not limited to, federal and/or state criminal, law enforcement, or traffic records, which may include confirmation by fingerprint identification. I further authorize any former employer, person, firm, corporation, credit agency, administration body, or governmental agency to give the Board of Education, or its agents, or its employees any information they may have regarding me. In consideration of the review of my employment application by the Board of Education, its members, officers, agents, or its employees, I hereby release the Board of Education to which this application is submitted and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. If employed, I further authorize this Board of Education or its agents to provide information about my employment in this school system to future employers or prospective employers. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed original. I have read the information contained in the application carefully and certify that the information I have given is correct and complete. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. I also understand that the application, references, and other employment-related information become property of the local school system and are classified as confidential information. I understand that the employment application has been developed, reviewed and approved by the human resource staff for the individual school districts. Both the website and the application are a resource to assist applicants in applying for employment with local boards of education across North Carolina. Neither the NC State Board of Education nor the NC Department of Public Instruction has approved the contents of the website or the employment application. I understand that in compliance with the Immigration Reform and Control Act of 1986, the Board of Education will employ only United States citizens and aliens lawfully authorized to work in the United States. Upon employment, acceptable authorization and identification documents may be required. I understand that any offer of employment is conditional upon the receipt by the Board of Education of an acceptable criminal history check pursuant to authorization above. In addition, I understand that in accordance with NC General Statutes, I do not have to disclose any arrest, charge or conviction that has been expunged. In compliance with federal law, including the provisions of Title IX of the Education Amendments of 1972, public schools in North Carolina do not discriminate on the basis of race, sex, religion, color, national or ethnic origin, age, disability, or military service in its policies, programs, activities, admissions or employment. If you feel that you have been discriminated against based upon any of the aforementioned criteria, please contact the Title IX Coordinator with the employing school system, or the Office of Civil Rights of the U.S. Department of Education (OCR).

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Applicant's Signature

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Date

**Gates County Schools**  
**Voluntary Equal Employment Opportunity Identification**

The Equal Employment Opportunity Commission (EEOC) requires organizations with 100 or more employees to complete an EEO-1 report each year. The EEOC has recently announced several changes to the job categories and rearranged its race and ethnicity groupings. Therefore, we are asking employees and applicants to complete a new voluntary self-identification sheet below so that we can properly update our records according to these new report requirements.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records and will only be accessed by Human Resources Department personnel. Please return completed forms to the Human Resources Department.

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**Name:** \_\_\_\_\_ **Last 4 digits of SSN:** \_\_\_\_\_  
**Primary Site:** \_\_\_\_\_  
**Primary Position:** \_\_\_\_\_ **Position Description:** \_\_\_\_\_

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**ETHNICITY:**

Are you of Hispanic or Latino ethnicity – a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race?

Yes  No

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**RACE:** Please check one or more of the descriptions below corresponding to the racial group(s) with which you identify.

**Black or African American** – A person having origins in any of the black racial of Africa.

**Native Hawaiian or Other Pacific Islander** - A person having origins in any of the peoples of Hawaii, Guam, Samoa or other Pacific Islands.

**Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

**American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America) and who maintain tribal affiliation or community attachment.

**White** – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

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**Signature:** \_\_\_\_\_ **Date Completed:** \_\_\_\_\_

**Gates County School is an Equal Opportunity Employer**

**(Applicant to keep this Summary of Rights)**

*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, 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 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, 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](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.

## DISCLOSURE & AUTHORIZATION

### DISCLOSURE - NOTICE REGARDING BACKGROUND INVESTIGATION

Gates County Public Schools 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 and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. 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. The most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Background Investigation Bureau, LLC, ("BIB") who may be reached at 9710 Northcross Center Court, Huntersville, NC 28078, or by phone at (877) 439-3900 or by another outside organization. Other types of information that may be obtained include but are not limited to social security number verification, sex offender registry checks, criminal records checks, inmate records searches, motor vehicle records, and court records checks. The information contained in these consumer reports may be obtained by BIB from public record sources and will not be used to discriminate against you in violation of any law. The scope of this Disclosure and Authorization is all-encompassing, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. The BIB privacy policy may be found at [www.BIB.com](http://www.BIB.com)

**New York applicants or employees only:** You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by directly contacting the consumer reporting agency identified above.

### AUTHORIZATION AND ACKNOWLEDGMENT

I acknowledge receipt of the DISCLOSURE - NOTICE 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" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, institution, school or university (public or private), information service bureau, past or present employer or supervisor, private business, insurance company or personal reference, and/or other persons to furnish any and all background information requested by BIB, additional third-party organizations acting on behalf of Employer, and/or Employer itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

- Please check this box if you are a Minnesota or Oklahoma applicant or employee and would like to receive a copy of a consumer report if one is obtained by the Employer.
- Please check this box if you are a California applicant or employee and you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Employer at no charge whenever you have a right to receive such a copy under California law.  
 (\*if you elect to receive a copy, you are required (on an ongoing basis) to keep Employer informed of address changes so reports are not sent to old addresses.)

**Personal Identifying Information for Consumer Reporting Agency -- please print or type (list all names used; maiden, surname, alias)**

Last Name	First	Middle
Last Name	First	Middle
Last Name	First	Middle
Home Street Address		Apartment/Unit #
City	State	ZIP
Phone	E-mail Address	
*Date of Birth	*Social Security No.	Gender
		Race
Drivers License Number	State Issued	Expires

\*This information is for the sole purpose of retrieving the background information listed above and will not be used by Employer for discriminatory purposes.

**California applicants or employees only:** By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Signature: \_\_\_\_\_ Date \_\_\_\_\_