

JENNINGS COUNTY SCHOOL CORPORATION

34 West Main Street
North Vernon, Indiana 47265

BOARD MEMBER APPLICATION District 2 – Geneva & Sand Creek Township

Directions: Please provide all information requested in a type/written form. Your completed application is to be placed in a sealed envelope and hand delivered or mailed to Amy Pettit, Board President, Jennings County School Corporation, 34 West Main Street, North Vernon, Indiana no later than **June 11, 2025**.

Directory Information:

Last Name First Name Middle Name

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Present Position

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Business Address/Phone

Home Address/Phone

Qualifications: Please an "X" beside each qualification that you fulfill

<input type="checkbox"/>	I am a registered voter in the territorial limits of Jennings County School Corporation and have been for at least one year.
<input type="checkbox"/>	Since this is a Geneva & Sand Creek Township position, I have resided in Geneva and/or Sand Creek Township for at least one year.
<input type="checkbox"/>	I do not hold any elective or appointive political office under the jurisdiction of any precinct, township, or county unit.
<input type="checkbox"/>	I am not interested in any contract with, or claim against Jennings County School Corporation, either directly or indirectly.
<input type="checkbox"/>	I am 21 years of age or older.

Organization Memberships: Please list below including offices held.

Educational Experience: High school (List years of attendance), College (List years of attendance & degree areas)

Experience working with children: Examples-4-H Club Sponsor, Sunday school teacher, little league coach, etc.

Questions:

What is your philosophy of education?

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What do you consider to be the duties of a school board member?

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What would you consider NOT to be duties of a school board member?

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What goals would you desire to see accomplished by the Jennings County School Corporation?

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In your opinion, what qualifications do you possess that would qualify you to be a school board member?

Are you legally eligible for employment in the country? Yes ☐ No ☐

(Proof of U.S. Citizenship or immigration status will be required upon an offer of employment.)

It is understood and agreed upon that any misrepresentation by me in the application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. I also understand that with an offer of employment, all employees of the JCSC are required to obtain an Expanded Criminal History background check and an Expanded Child Protection Index check through Safe Hiring Solutions and pay any and all fees associated with the background check process (\$30.00, price may vary).

Date: _____

Applicant's
Signature: _____

**JENNINGS COUNTY SCHOOL CORPORATION
SUPPLEMENT TO EMPLOYMENT APPLICATION
Request for Background Information**

Dear Applicant:

Jobs with the Jennings County School Corporation involve contact with our student population. We ask that you complete the questions below to help us evaluate your suitability to work with these students. All applicants for employment are expected to provide us with this information; you are not being singled out for closer inspection. This separate form is part of the application process itself and any misrepresentation or omission of facts may be grounds for disqualification from further consideration or for termination from employment regardless of when the misrepresentation or omission is discovered.

The conviction of a crime or any affirmative answer provided by you on this insert is not an automatic bar to employment. The school district will consider the nature of any conviction or alleged conduct underlying the affirmative response, the date of the alleged conduct in question, your intervening conduct and the relationship between the offense or alleged conduct underlying the affirmative response and position for which you are applying.

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1. Are you presently under investigation by any employer because of your conduct or the quality of your work? Yes ☐ No ☐ If yes, please explain the circumstances on a separate sheet and attach it to this application.
 2. Have you ever resigned from a job as a result of any investigation or discipline by an employer? Yes ☐ No ☐ If yes, please explain the circumstances on a separate sheet and attach it to this application.
 3. Have you ever been the subject of an investigation, an arrest, a charge, or a conviction involving the physical or sexual abuse of any persons whether an adult or a minor? Yes ☐ No ☐ If yes, please explain the circumstances on a separate sheet and attach it to this application.
 4. Have you ever been arrested, charged, and/or convicted for any misdemeanor or felony? Yes ☐ No ☐ If yes, please explain the circumstances on a separate sheet and attach it to this application.

AUTHORIZATION AND RELEASE

I AUTHORIZE THE Jennings County School Corporation to investigate my employment history and my criminal history, if any. Further, I authorize the Jennings County School Corporation to obtain any information about me maintained in the "child abuse registry" authorized by LC. 31-6-11-12.1, to obtain information associated with the expanded child protection index check, and an expanded criminal history check. I hereby authorize my previous employer and their agents and employees to release of my employment history records that are requested by the Jennings County School Corporation. Further, I also authorize any local, state, or federal agency to release to the Jennings County School Corporation any expanded criminal history records and child abuse registry records that pertain to me. I agree to execute all documents required to obtain the release of each such record and pay any and all fees associated with background checks (\$30.00, price may vary).

Link: JCSC.org; Employment; Safe Hiring Solutions

RELEASE OF CLAIMS

I HEREBY EXPRESSLY WAIVE AND RELEASE ALL CLAIMS THAT MAY ARISE OUT OF THE RELEASE OF RECORDS OR HISTORY HEREIN THAT I MAY HAVE AGAINST THE JENNINGS COUNTY SCHOOL CORPORATION, ITS DIRECTORS, OFFICERS, AGENTS, OR EMPLOYEES OR THAT I MAY HAVE AGAINST THE PROVIDER, ITS OFFICERS, AGENTS, OR EMPLOYEES, SUCH RECORDS OR HISTORY.

I HAVE READ THIS AUTHORIZATION AND RELEASE OF CLAIMS, AND I EXPRESSLY AGREE TO THE TERMS SET OUT HEREIN.

Signature

Date

Please Print Your Name

Social Security Number

Please Print Your Complete Address

Birthdate (Only for Purposes of Requesting Criminal History Information)