



**To:** New Hires  
**From:** Mary Wegner, Superintendent  
**Subject:** Background Check Procedures

Background checks are done to protect District students against potential harm from persons involved in violence, sexual abuse, or drug distribution. This required procedure is not intended to reflect upon any individual's reputation and/or character.

#### **Alaska Criminal History Record**

1. You are required to submit an Alaska Criminal History Record from the State of Alaska, which is available from the Alaska State Trooper Academy.

#### **Fingerprinting Procedures:**

1. You will need to schedule an appointment to get your fingerprints rolled. Fingerprints are rolled at the Sitka Police Department by appointment only. Please call 747-3245 to schedule a time. It costs \$10 + tax and usually takes between 15 and 20 minutes. You must have a valid photo ID with you.
2. Return the fingerprint cards to the Human Resources Office. The District will mail the fingerprint cards to the appropriate agency.

**The District may use fingerprint search results from other employers if they meet District requirements. Please discuss this option with staff at the Human Resources Office.**

**If you hold a current Alaska teaching certification you will not be required to complete the fingerprint procedure if you submit the certificate to the Human Resources Office.**

#### **Criminal Records Check on Personnel:**

No individual will be hired by the Sitka School District or placed on the substitute list until the criminal records investigation in accordance with AS 12.62.160 has been completed. Under emergency circumstances, the Superintendent may waive this requirement to allow someone to work until the results are back.

Applications from persons who have been convicted or have pled guilty or no contest to any felony, misdemeanor or violation will be considered by the Superintendent on a case-by-case basis. If charges are pending, no action will be taken on the individual's application until disposition of the charges.

Persons who are convicted of, or who plead guilty or no contest to, any offense other than a minor traffic violation during the course of their employment with the District shall be subject to termination or other employment action as appropriate in the circumstances.

Persons on the substitute list who are convicted of, or who plead guilty or no contest to, any offense other than a minor traffic violation shall immediately be removed from the substitute list. They may reapply for listing as provided in paragraph 2 above.

**Substitutes must be at least 21 years of age.**

**SITKA SCHOOL DISTRICT**

300 Kostrometinoff St

Sitka, AK 99835

(907)747-8622 phone

(907)966-1260 fax

**SUBSTITUTE APPLICATION**

Applications Are Kept For One Year

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, the presence of a non-job-related medical condition or disability, or any other legally protected status under A.D.A., Title I. Alternative communication formats are available upon request with advance notice.

Date of Application \_\_\_\_\_

Person other than spouse who will always be able to provide us with your current address and/or phone number:

Full Name \_\_\_\_\_  
(Last name) (First Name) (Middle Initial)

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_  
Area Code Number

Telephone \_\_\_\_\_  
Area Code Number

Social Security Number (optional) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**EDUCATIONAL AND PROFESSIONAL TRAINING**

Please list, in order of attendance, all educational institutions attended.

Name and location of Institution	Degree	Major	Minor
Undergraduate College Work			
Graduate College Work			

**ALASKA CERTIFICATE INFORMATION**

Are you certified in the State of Alaska?  Yes  No If yes, please check the area in which you meet Alaska Certification Requirements and give the endorsement(s) and expiration date indicated on your certificate(s):

Teacher (Type A)

Administrative (Type B)

Special Services (Type C)

Vocational (Type D)

Endorsement(s)/Expiration Date \_\_\_\_\_

**EDUCATIONAL EMPLOYMENT**

(List most recent first)

School Year During Which Service Was Rendered		Name and Address of School	Grade Taught/Position Held (Indicate Full-Time, Part-Time, or Substitute)	Reason for Leaving
Beginning Mo/Yr	Ending Mo/Yr			
Principal/Supervisor Name		Title	Phone	
Principal/Supervisor Name		Title	Phone	

Total number of full time years of Elementary/Secondary experience: \_\_\_\_\_

**OTHER EMPLOYMENT**  
**(List most recent first)**

Inclusive Dates	Type of Work or Position Title	Employer	Supervisor
		Employer	Name
		Address	Phone
		Employer	Name
		Address	Phone

**REFERENCES**

List three (3) persons who are recently acquainted with your professional/personal abilities. The forms are enclosed. These should be mailed directly to the Sitka School District.

Name	Address & Telephone Number	Position

Have you been dismissed, fired or terminated from any job within the last ten years? If so, please provide the date of your termination, the name, address and phone number of the employer who terminated you, and a description of the circumstances leading to your termination:

Have you ever had an employment or business-related license or certificate revoked or suspended (examples: teaching certificate, child care license)? If so, please provide the date of the action, the name, address and phone number of the body or agency who took the action, and a description of the circumstances leading to the action:

Is any charge or complaint now pending against you, or any investigation currently being conducted of alleged misconduct by you, by any law enforcement, licensing or regulatory agency or by your current or a former employer? If so, please provide the name, address and phone number of the body or agency who is conducting the investigation or other proceeding, and a description of the circumstances leading to the investigation or proceeding:

Please tell us of any additional information that you feel may help us in reaching an employment selection:

## Criminal Record Information

For purposes of the following questions, the term “conviction” includes convictions that result from pleas of “guilty” or “no contest.”

Have you ever been convicted of a felony? Yes      No

If yes, please state the offense, the date of conviction, and provide a description of the events leading to your conviction:

Have you been convicted of any misdemeanor charge within the last 10 years? Yes      No

If yes, please state the offense, the date of conviction, and provide a description of the events leading to your conviction:

Have you ever been convicted of a misdemeanor involving violence, sexual assault, molestation, exploitation, or an offense committed against children? Yes      No

If yes, please state the offense, the date of conviction, and provide a description of the events leading to your conviction:

*Note: A conviction is not an automatic bar to employment. Each case is considered on its own merit in accordance with standards established in Sitka School District board policies and administrative regulations.*

### Applicant's Statement

By signing this application, I certify that I am legally authorized to work in the United States. In addition, I certify that the answers I have given here are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I further understand that the Sitka School District may contact third parties such as current or former employers, business associates, instructors and other educational colleagues, co-workers, military supervisors and others familiar with my background in order to verify the information provided in this application and to assess my suitability for employment with the District. I understand that this inquiry may include collection of information relating to my character, general reputation, and personal characteristics as those subjects bear on my suitability for employment, in addition to other information relating to my educational and work experience. I authorize the release of such information to the Sitka School District, provided the information is used solely to determine my suitability for employment with the Sitka School District. I release the entity and/or individual providing the information from liability for any information provided in good faith, and I release the Sitka School District from liability for relying in good faith on the information so provided. I further agree that the Sitka School District, and the individual or entity providing the information, may withhold the release to me of personal reference information (not including data relating to my educational qualifications, criminal record and employment experience), provided that the information obtained is used solely to determine my suitability for employment with the District. I understand that a criminal background check by means of a fingerprint check with the Alaska State Troopers and the Federal Bureau of Investigation according to Alaska Statute 12.62.160 may be required as part of this application.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

\_\_\_\_\_  
Signature of the Applicant

\_\_\_\_\_  
Date

#### Required

- Application
- 2 Letters of recommendations on SSD Form
- Alaska Criminal History Record Report
- Fingerprint Card

Substitute

CONFIDENTIAL

**This letter of recommendation will not be considered valid unless mailed in or delivered by the person(s) making the recommendation.**

Send to:

SITKA SCHOOL DISTRICT  
300 Kostrometinoff St  
Sitka, Alaska 99835

Name and Address of person making recommendation:

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Your name has been given as a reference by \_\_\_\_\_, who has applied for a position with the Sitka School District. We appreciate your evaluation of the applicant's ability and success as a potential teacher. Please return this form to the Personnel Office at the above address. All information will be treated with strict confidence. Thank you for this courtesy and for your cooperation.

Indicate grade level and school subjects in which the candidate is best qualified.

Grade: \_\_\_\_\_ Subjects: \_\_\_\_\_

How long and in what capacities have you known this candidate? \_\_\_\_\_  
\_\_\_\_\_

Date of employment:  
(if applicable)

From: \_\_\_\_\_

To: \_\_\_\_\_

Candidate left your employment:      Voluntarily \_\_\_\_\_ Involuntarily \_\_\_\_\_

Is candidate eligible for rehire?      Yes \_\_\_\_ No \_\_\_\_

Please add comments that you think may be helpful. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I rank the applicant as indicated in the following areas:

<b>Characteristic</b>	<b>Excellent</b>	<b>Above Average</b>	<b>Average</b>	<b>Below Average</b>	<b>No Information</b>
Skill as a teacher					
Judgment					
Ability to work with others					
Initiative					
Discipline					
Professional ethics					
Emotional stability					
Warm and outgoing personality					
Vitality					
Self-confidence/Poise					
Promise of growth					
Attitude toward students					
Cooperation					
Dependability					
Self-Improvement					
Preparation and use of lesson plans					

Overall evaluation of Candidate:           Excellent     ( )  
   Above Average   ( )  
   Average       ( )  
   Below Average   ( )

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PHONE \_\_\_\_\_

POSITION \_\_\_\_\_

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SIGNATURE \_\_\_\_\_

PHONE \_\_\_\_\_

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DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

PHONE \_\_\_\_\_ POSITION \_\_\_\_\_