



High Desert ESD Employment Application

145 SE Salmon
Redmond OR 97756

Attn: HR Specialist or Attn: Substitute Coordinator Phone: (541) 693-5600 FAX: 541-693-5601 www.hdesd.org

Last Name	First Name	M.I.	Date
Mailing Address			Phone #1
E-Mail Address			Phone #2
List Other Names You Are Known By			Phone #3

List languages you speak fluently (other than English) _____

List languages that you can read/write fluently (other than English) _____

Type of work desired, check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Teaching & Other Licensed Positions | <input type="checkbox"/> Substitute, Teaching & Other Licensed Positions |
| <input type="checkbox"/> Non-Teaching/Non-Licensed Positions | <input type="checkbox"/> Substitute, Non-Teaching/Non-Licensed Positions |
| <input type="checkbox"/> Supervisor/Manager Positions | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Administrative Positions | <input type="checkbox"/> Posting #: _____ |

Use Only For Licensed/Certified Employment (official transcripts are required at time of hire)

State	License Type	License Title	Expected	Expires	Endorsements/Authorizations

Education

Do you have a High School Diploma or GED? Yes No
 Name High School, state, & city or name state that issued GED:
 Year you received diploma or GED:

Colleges and Universities	State	Field of Study	Degree	Start Date Month/year	End Date Month/year

Veteran's Preference

Are you a "Veteran" as defined under Oregon law (ORS 408.225(e))? Yes No

If you answer "yes" to this question, your service record should be reflected in the Employment History section of the application (below).

Are you a "Disabled Veteran" as defined under Oregon law (ORS 408.225(e))? Yes No

If you answer "yes" to this question, your service record should be reflected in the Employment History section of the application (below).

Employment History Give a complete account including military experience, attach an additional sheet if necessary

Employer	City/State	Phone	Position(s)	Start & End Dates MM/YY – MM/YY	Years at this Position	Reason for Change

Skills, Experiences, Relevant Organizational Affiliations

Type	Description

Interests, Hobbies

Type	Description

References Name professionals who have first-hand knowledge of your character, personality, and abilities

Name	Work Phone	Home Phone	Position/Title

When received, this page will be removed from your other application materials.

Drug Free Workplace

I understand that High Desert ESD is committed to maintaining a drug-free workplace and complies strictly with all applicable state and federal statutes and regulations in employment and district programs. I understand that all successful applicants will be required to take a pre-employment drug test prior to beginning employment.

Criminal History Records Check/Fingerprinting

I understand that criminal history records checks and fingerprinting are required by law (ORS 326.603, ORS 181.539) and by HDESD Board policy. Notification by Oregon's Superintendent of Public Instruction, or designee or by the Oregon State Board of Education that an individual has been convicted or has made a false statement as to conviction of any crimes will terminate employment or contract status immediately. An individual terminated may appeal the action taken by the District as a result of such checks in accordance with procedures established by law (ORS 183.413) or by Board policy. I understand that should I refuse to consent to criminal history records checks or refuse to be fingerprinted; the superintendent shall terminate me from employment or contract status immediately. Individuals who have successfully completed an Oregon, FBI and ODE criminal history records check by a previous Oregon school district and have not since resided outside Oregon may be exempt from this requirement.

Affirmative Action Information

This information including the following page "Ethnicity and Race Identification" is voluntary and is collected only for Equal Employment Opportunity reporting purposes. These two pages of information will be physically separated from your other application materials and will not affect the application process in any manner. Should you prefer not to provide this information, there will be no effect on your application.

Sex Female
 Male

Date of Birth ___/___/___

If offered employment, I agree to drug testing and a criminal background check as explained above.

Print Name

Applicant Signature

Date

ETHNICITY AND RACE IDENTIFICATION

(Please read the Privacy Act Statement and instructions before completing form.)

Name (Last, First, Middle Initial)	Social Security Number	Birth date (Month and Year)
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Agency Use Only

Privacy Act Statement

Ethnicity and race information is requested under the authority of 42 U.S.C. Section 2000e-16 and in compliance with the Office of Management and Budget's 1997 Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity. Providing this information is voluntary and has no impact on your employment status, but in the instance of missing information, your employing agency will attempt to identify your race and ethnicity by visual observation.

This information is used as necessary to plan for equal employment opportunity throughout the Federal government. It is also used by the U. S. Office of Personnel Management or employing agency maintaining the records to locate individuals for personnel research or survey response and in the production of summary descriptive statistics and analytical studies in support of the function for which the records are collected and maintained, or for related workforce studies.

Social Security Number (SSN) is requested under the authority of Executive Order 9397, which requires SSN be used for the purpose of uniform, orderly administration of personnel records. Providing this information is voluntary and failure to do so will have no effect on your employment status. If SSN is not provided, however, other agency sources may be used to obtain it.

Specific Instructions: The two questions below are designed to identify your ethnicity and race. **Regardless of your answer to question 1, go to question 2.**

Question 1. Are You Hispanic or Latino? (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.) Yes No

Question 2. Please select the racial category or categories with which you most closely identify by placing an "X" in the appropriate box. Check as many as apply.

RACIAL CATEGORY (Check as many as apply)	DEFINITION OF CATEGORY
<input type="checkbox"/> 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 maintains tribal affiliation or community attachment.
<input type="checkbox"/> 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.
<input type="checkbox"/> Black or African American	A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> White	A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.



High Desert ESD
Human Resources
145 SE Salmon
Redmond OR 97756
(541) 693-5600
www.hdesd.org

Information Page Save For Reference

We appreciate your interest in High Desert Education Service District. Below is a guide to help you understand our application process and assist you in the successful completion of your application.

APPLICATION It is your responsibility to complete all parts of the application. It is not necessary to complete a separate application for each posted vacancy for which you wish consideration. Resumes may be attached for additional information, but may not be used to substitute completion of the application. Applicant files remain active for one year. You may attach any supplemental information such as a resume, cover letter, copy of license/certificate, copies of official transcripts, and letters of recommendation.

POSTED VACANCIES Applications are not automatically considered for openings. Read job announcement carefully. Additional instructions or requirements may appear on job postings. Applicants must notify Human Resources in writing by providing the Job Posting # and request to be on the candidate list.

SUBSTITUTE POSITIONS Substitutes are hired on a day-to-day on-call basis. Candidates interested in being considered for substitute positions should contact (541) 693-5600 X2625. Substitutes are required to complete mandatory processes and orientation prior to employment.

INTERVIEW and SELECTION PROCESS Evaluation of applications will be completed as soon after the closing date as possible. Due to the large number of applications for most positions, it is not possible to interview every applicant. If you are selected for an interview, you will be notified as soon as possible (usually 1-3 weeks). If you are not selected for an interview, you will receive notification when the position has been filled.

FINAL CANDIDATES Under the Immigration Reform & Control Act of 1986, you will need to present verification of your identity and right to work in the USA no later than your first day of employment. You will be finger printed for clearance through the Oregon State Police and by the Federal Bureau of Investigation, and a criminal record check on you will be completed. You will be required to pass a pre-employment drug test prior to beginning employment.