



Instructional Staff Application for Employment

(Page 1 of 6)

Banning Lewis Ranch Academy
7094 Cottonwood Tree Drive
Colorado Springs CO 80927
719-570-0075

Application For: _____
Application Received: _____
Available Start Date: _____

Mosaica Education is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief or disability.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time may result in immediate employment termination.

Personal Information *(Please submit a resume with this Employment Application)*

_____ First Name	_____ Middle	_____ Last	
_____ Street Address	_____ City	_____ State	_____ Zip Code
_____ Home Telephone Number	_____ Social Security Number	_____ Today's Date / /	
_____ Daytime Phone (contact permitted)	_____ E-Mail Address		

Other phone numbers

Have you ever been convicted of a crime? Yes No
If "yes", please explain on reverse side of this page or on an attachment.

Certification Information

List any certificates that you hold. Include, minimally, the following information: state, field, expiration date, type and number. If you are enrolled in a program leading to a relevant certificate, please note the program and the approximate date of completion. List any additional training programs completed that may be relevant for the position that you seek.



Your Name: _____ Instructional Staff Application (Page 2 of 6)

Position Preferences

For what position are you applying? _____

Available Start Date: ____ / ____ / ____

Education and Professional Training

College/University

School Name: _____

City and State: _____

Degree or # of years completed: _____

Major or Subject: _____

Grade Point Average: _____

Please list additional colleges/universities attended on separate page

Graduate School

School Name: _____

City and State: _____

Degree or # of years completed: _____

Major or Subject: _____

Grade Point Average: _____

Please list additional colleges/universities attended on separate page

Professional Affiliations

Please list Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability):

Professional References

Name: _____

Title: _____

Company: _____

Phone: _____

Professional

Relationship: _____

Name: _____

Title: _____

Company: _____

Phone: _____

Professional

Relationship: _____

Name: _____

Title: _____

Company: _____

Phone: _____

Professional

Relationship: _____

Name: _____

Title: _____

Company: _____

Phone: _____

Professional

Relationship: _____



Your Name: _____ Instructional Staff Application (Page 3 of 6)

Previous Employment

List your current or most recent employment first. Include work related internships, military and volunteer work. Continue on separate sheet as necessary.

Current Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Held/Title: _____
Reasons for Leaving: _____
Dates of Employment: From: ____ / ____ / ____ To: ____ / ____ / ____
May We Contact this Employer: Yes: No:
Salary: Beginning: _____ End: _____

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Held/Title: _____
Reasons for Leaving: _____
Dates of Employment: From: ____ / ____ / ____ To: ____ / ____ / ____
May We Contact this Employer: Yes: No:
Salary: Beginning: _____ End: _____

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Held/Title: _____
Reasons for Leaving: _____
Dates of Employment: From: ____ / ____ / ____ To: ____ / ____ / ____
May We Contact this Employer: Yes: No:
Salary: Beginning: _____ End: _____

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Held/Title: _____
Reasons for Leaving: _____
Dates of Employment: From: ____ / ____ / ____ To: ____ / ____ / ____
May We Contact this Employer: Yes: No:
Salary: Beginning: _____ End: _____

Previous Employer: _____
City and State: _____
Telephone Number: _____
Supervisor's Name and Title: _____
Position Held/Title: _____
Reasons for Leaving: _____
Dates of Employment: From: ____ / ____ / ____ To: ____ / ____ / ____
May We Contact this Employer: Yes: No:
Salary: Beginning: _____ End: _____



Your Name: _____ Instructional Staff Application (Page 5 of 6)

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from the school and/or any of its agents. This authorization and consent shall be valid in original, fax, or copy form.

Signature of Applicant

Date

All hiring and employment is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by Mosaica Education has no specific term and may be terminated by the employee or by the school with or without notice. I acknowledge that the school administration has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with the school, and that failure to provide this evidence will result in the termination of my employment.

I release and hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to the school. I agree to release and hold harmless the school from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with the school may be terminated.

Signature of Applicant

_____/_____/_____
Date

How were you referred to Mosaica Education? Please check the most appropriate response.

College or University Recruiter or Agency Employee Referral Advertisement Walk-in

Other Referral: _____



EEO COMPLIANCE REPORTING MANDATORY 7/1/07

INFORMATION FLOW FOR HUMAN RESOURCES DEPARTMENT USE ONLY TO BE COMPLETED AND SIGNED BY APPLICANT

Keep this applicant release in secure files separate from personnel records.

Mosaica Education, Inc. IS AN EQUAL OPPORTUNITY EMPLOYER. In order to help us improve our recruiting programs and comply with Federal and State governmental information requests, we must ask the questions below. Information about date of birth, sex, race and veteran status is not used in the selection process. This page will be detached and kept separate from your application. You are required to provide this information. Please keep in mind that this information will not affect your employment. Thank you for your cooperation.

1. **Name:** _____

2. **Date of Birth:** _____ (mm/dd/yyyy)

3. **Gender:** ___ Male ___ Female

4. **Veteran Status:**

___ Not a Veteran

___ Other Veteran

___ Vietnam Era Veteran

___ Disabled Veteran

5. **Ethnic Classification:**

___ American Indian/Alaska Native

___ Two or More Races

___ Asian

___ White

___ Black or African American

___ Hispanic or Latino

___ Nat Hawaiian/Other Pac Islander

___ Not Applicable (Non-US)

___ Not Specified (default)



6. **Signed:** _____ **Date:** _____

Reasonable Accommodation

Under the Americans with Disabilities Act of 1991, an employer is required to reasonably accommodate qualified individuals with a disability. The reasonable accommodation requirement applies to the application process, any pre-employment test, interviews and actual employment, but only if the employer knows that accommodation is required. If you are disabled and require accommodation, you may request it at any time.