

**Idaho Arts Charter School**  
**1220 5<sup>th</sup> Street North**  
**Nampa ID 83687**  
**(208) 463-4324**

Dear Applicant:

Thank you for your interest in the position of teacher with the Idaho Arts Charter School. To aid you in the application process please be advised that to be considered for the position your file must be complete. A completed file will include the following:

1. Completed application form
2. Copy of Idaho Certificate of Evidence or Eligibility for Certification
3. Copies of transcripts
4. Resume

Once your application is complete, the following process will be followed:

- Applications are screened by the IACS principal and/or hiring committee.
- Interviews are arranged and conducted by the IACS Principal and/or their interview team.
- The IACS Principal will make a recommendation to the IACS Board.
- The IACS Board will make an offer to the selected applicant.

Thank you again for your interest in the Idaho Arts Charter School. If you need additional information, please feel free to e-mail our principal, Jackie Collins, at [jackie.collins@idahoartscharter.org](mailto:jackie.collins@idahoartscharter.org) or call her at 463-4324.

Sincerely,

Matt Mesropian  
IACS Board President

# Idaho Arts Charter School

## Application for Professional Position

Return completed application to:  
IACS  
1220 5<sup>th</sup> St North  
Nampa ID 83687

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

Date Received: \_\_\_\_\_

Idaho Arts Charter School is committed to providing equal employment opportunities for all persons without regard to race, creed, color, national origin, sex, age or physical/mental disability except as may be necessary to meet a bona fide occupational qualification, and the school complies with the requirements and objectives of applicable state and federal laws.

### Personal:

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First Name	Initial	Last Name
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Address: \_\_\_\_\_

Current Number and Street

City

State

Zip

(\_\_\_\_)\_\_\_\_\_

Social Security Number

Home Phone Number

(\_\_\_\_)\_\_\_\_\_

E-mail Address

Cell Phone Number

With whom could a message be left? \_\_\_\_\_

Name

Phone Number

Applying for:    Full-time            Part-time

### **Certification** (please enclose copy, official required if hired)

Do you hold a valid Idaho Certificate for the position for which you are applying?            Yes    No

An Idaho Credential is required for employment. I will provide the Idaho Arts Charter School with one of the following:

Idaho Teaching Credential

Idaho Teaching Credential Application

Out of State Teaching Certificate

I am currently completing a teacher education program.

Other. Explain: \_\_\_\_\_

Subject Area Endorsements

Which Standard Teaching Certificates do you hold? \_\_\_\_\_

What endorsements do you hold on your certificate?

\_\_\_\_\_

**Employment Experience**

List all positions held six (6) months or more. Begin with most recent position.

Are you presently under contract with another school district?    Yes    No

Feel free to copy if you need more space. Total contract experience:    Teaching

Dates of Employment	Position	Employer	Address (including phone number)	Supervisor

**Education**

College or University	Location	Dates of Attendance	Degree/Date Given

**Professional Memberships / Organizations**

- 1.
- 2.
- 3.
- 4.

**Honors / Leadership**

- 1.
- 2.
- 3.
- 4.

**Essay Questions (teaching positions only)**

Please attach short essay responses to the following questions (maximum of 150 words for each question).

1. Describe how you integrate the arts into your teaching practice.
2. Describe your two strongest personal attributes. Give examples of how these attributes have helped you in your teaching practice.
3. Describe a difficult situation with a parent or student that you experienced. How did you resolve the situation?
4. What is your background with respect to the arts, either performing or visual?

**Essay Questions (administrative positions only)**

Please attach short essay responses to the following questions (maximum of 150 words for each question).

1. Describe how you would ensure that your staff is integrating the arts into their teaching practice.
2. Describe your two strongest personal attributes. Give examples of how these attributes have helped you in your educational practice.
3. Describe a difficult situation with a parent that you experienced. How did you resolve the situation?
4. Describe a difficult situation with a staff member that you experienced. How did you resolve the situation?
5. How would your staff describe you?

**References** – List at least three (3) references capable of assessing your ability to perform the work for which you are applying. It is your responsibility to have them submit references to the IACS Board for your application file.

1.	Name		Position		
	Address	City	State	Zip	Telephone Number
2.	Name		Position		
	Address	City	State	Zip	Telephone Number
3.	Name		Position		
	Address	City	State	Zip	Telephone Number

**Legal Information**

Have you ever resigned and/or been dismissed from a position, whether employment or otherwise, because you were accused of an incident of sexual misconduct or harassment of a person under the age of 18 years?

Yes No If yes, a written explanation is required.

Have you ever been convicted of any crime? (Traffic infractions and motor vehicle violations classified as misdemeanors or felonies must be included.) Yes No If yes, give the date, place, nature of offense and circumstances in box below. Include all guilty pleas, withheld judgments, pleas of nolo contendere and other convictions.

Date	Location	Conviction	Disposition

It is your responsibility to determine the nature of your criminal record. Failure to include any criminal convictions will be considered a deliberate misrepresentation and may result in dismissal. A conviction will not automatically disqualify the applicant or applicants from the job applied for. The seriousness of the crime and the date of the conviction will be considered. IACS will treat answers to the questions above as confidential and no disclosure will be made without the applicant's permission.

**Please Read This Section Carefully**

I hereby authorize IACS to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

I understand that IACS does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal word authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I understand if selected as a finalist I will have a criminal records check to be conducted through the Department of Law Enforcement. This check requires fingerprinting of the new employee. There will also be a screening completed through the Central Sex Offender Registry of Idaho.

In the event I am employed by the Idaho Arts Charter School, I agree to abide by all its applicable policies and procedures. *My signature below certifies that I have read and understand this complete page and agree to the terms and conditions outlined in this document.*

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

Department of Law Enforcement  
Idaho Bureau of Criminal Identification  
700 S Stratford Dr  
Meridian ID 83642  
(208) 884-7130

I, \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Hereby authorize the Idaho Arts Charter School to receive any and all information concerning me contained within the files of the Criminal Identification Bureau under the name listed above and under any alias or any other first or last name which is listed below.

Print alias or other first or last name below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return to: Idaho Arts Charter School  
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Nampa ID 83687