



# Le Monde French Immersion Public Charter School

## Independent Contractor Personal Information Disclosure Form

**WRITE POSITION OF EMPLOYMENT/CONTRACTOR ARE YOU ARE APPLYING FOR AT LE MONDE FRENCH IMMERSION PUBLIC CHARTER SCHOOL IN BLANK BELOW:**

**POSITION APPLYING FOR: AND/OR AREA OF SPECIALITY: Dance, Chess, Art, Martial Arts, etc:**

### CONTACT INFORMATION

Last Name	First	M.I.	Date
Street Address		Apartment#	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Date of Birth (mm/dd/yyyy)	

LIST ALL ALIAS NAMES, MAIDEN NAMES, ETC.

**Do you have the ability to pass a criminal background check clearing you to work in a school setting? CIRCLE YES NO**

**Have you ever been convicted of a felony? CIRCLE YES NO**  
**If yes, explain**

**Are you a citizen of the United States? CIRCLE YES NO**

**If no, are you authorized to work in the U.S.? CIRCLE YES NO**

*(Le Monde French Immersion Public Charter School Currently does not sponsor teachers from other countries to work in the U.S. you must have your own authorization to work in the U.S.)*

### WORK EXPERIENCE (Last Two Jobs)

*(FILL OUT THIS INFORMATION IN ADDITION TO ATTACHING FULL RESUME)*

<b>Company/School</b>	Phone	( )
Address	Supervisor	
Job Title	Starting Salary/Wage \$	Ending Salary/Wage \$
Responsibilities		
From To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO		
<b>Company/School</b>	Phone	( )
Address	Supervisor	
Job Title	Starting Salary/Wage \$	Ending Salary/Wage \$

Responsibilities	
From To	Reason for Leaving
May we contact your previous supervisor for a reference? YES      NO	
<b>SUPPLEMENTAL TEACHING INFORMATION</b>	
Briefly list any additional teaching experience you have had, not listed above.	
<b>DO YOU SPEAK FRENCH?    CIRCLE   YES    NO</b>	
<b>ARE YOU FLUENT IN SPEAKING FRENCH?    CIRCLE   YES    NO</b>	

<b>Business Disclosure Information:</b>
Official Name of Your Business:
Is Your Business Registered in Oregon? <b>CIRCLE   YES    NO</b>
Name of Business:
Do you have liability Insurance? <b>CIRCLE   YES    NO</b> PLEASE ATTACH PROFF OF LIABLITY INSRUANCE

Times Available to Teach: Please check days & Times Available	Monday	Tuesday	Wednesday	Thursday	Friday
8 am – 12 pm					
12 pm – 3 pm					
3pm- 5:30pm					

**DO YOU HAVE CONTRACTS WITH OTHER BUSINESSES, SCHOOLS, OR OTHER?**

Please list all other independent contracts to which you were a party in the last two years:

Other Party's Name	Phone No. (    )	Contract for	Contract Date
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Other Party's Name	Phone No. (    )	Contract for	Contract Date
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**RESUME**

Please attach Resume.

**REFERENCES***Please list three professional references.*

Full Name	Relationship
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Company	Phone (    )
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Address

Full Name	Relationship
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Company	Phone (    )
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Address

Full Name	Relationship
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Company	Phone (    )
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Address

**DISCLAIMERS, PERMISSIONS AND ASSERTIONS**

If I am retained as an independent contractor, I give **Le Monde French Immersion Public Charter School** permission to run a Fair Credit Reporting Act compliant background check on me. (This includes some or all of the following: County and State Criminal Records, SSN Verification, Address History, Sexual Offender Registry and Office of Foreign Assets Control exclusion database.) I understand that giving my date of birth will not be used for any reason other than to run my background check and to verify my education. I understand that my date of birth has no bearing on my application and will not be shared with anyone else. If I am retained, I grant **Le Monde French Immersion Public Charter School** permission to share my resume with potential **Le Monde French Immersion Public Charter School** parents who are interested in me as a teacher. I certify that my answers are true and complete to the best of my knowledge. If the information contained in this disclosure form leads to an independent teacher contract, I understand that false or misleading information in this disclosure form or in an interview may result in termination of my contract.

Signature:

Date:

