

**JERSEY COMMUNITY UNIT SCHOOL DISTRICT No. 100**  
**JERSEY AND GREENE COUNTIES**  
**100 LINCOLN AVENUE**  
**JERSEYVILLE, ILLINOIS 62052**  
**PHONE: 618-498-5561**

**TEACHER AIDE APPLICATION**

**GENERAL INFORMATION**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

POSITION YOU ARE QUALIFIED FOR AND INTERESTED IN (LIST ALL)

\_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_ CERTIFICATE(S) HELD \_\_\_\_\_  
*(DISCLOSURE IS VOLUNTARY)*

**EDUCATION**

HIGH SCHOOL	OTHER	LOCATION	MAJOR/MINOR	DEGREE

**WORK EXPERIENCES**

SCHOOL	DATES	SUBJECT/GRADE	REASON FOR LEAVING

**REFERENCES (Professional/Prior Employees)**

NAME	OCCUPATION	PHONE NUMBER	ADDRESS

Jersey Community Unit School District No. 100 does not discriminate on the basis of race, color, religion, national origin, age, sex, sexual orientation, marital status, disability, unfavorable military discharge, or any other unlawful basis in recruitment, selection, or employment of its employees. Individuals requiring special accommodations in the application process should contact the District Administrator at the Unit Office (618-498-5561) and request assistance. Jersey Community School District No. 100 is an Equal Opportunity Employer and Educator.

Why do you wish to work in our school district?

What are your strengths?

Do you have any experiences working with children? If yes, please explain.  
Yes \_\_\_\_\_ No \_\_\_\_\_

Do you understand the training and skill requirement of the job you are applying for?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Can you meet these requirements with or without reasonable accommodation?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Have you worked for Jersey Community School District No. 100 before? If yes, what capacity?  
Yes \_\_\_\_\_ No \_\_\_\_\_

I understand that I am subject to a criminal background investigation pursuant to the laws of the State of Illinois. I further understand that I may be automatically disqualified from consideration for hire or subject to immediate dismissal if the investigation discloses conviction of certain specified criminal offenses set forth under 105 ILCS 5/10-21.9 of Illinois School Code. I hereby authorize the District to initiate a criminal background check (including fingerprints) by the Illinois Department of State Police and agree to execute any forms required for said investigation.

\_\_\_\_\_  
(Applicant Signature) (Date)

1. Have you been found guilty of, or pled guilty to, any criminal offense, other than a minor traffic violation, in the State of Illinois or any other state? Yes \_\_\_\_\_ No \_\_\_\_\_

If the answer to the foregoing question is "yes", please state the date, place and nature of such conviction. (Applicants for employment are not obligated to disclose sealed or expunged records of arrests or convictions.)

2. Have you ever been discharged or forced to resign from any prior job?  
Yes \_\_\_\_\_ No \_\_\_\_\_

I, \_\_\_\_\_ have read and understand each of the foregoing questions and hereby affirm that all of the foregoing responses which I have provided are true and accurate.

\_\_\_\_\_  
(Applicant Signature) (Date)

I understand that any false or misleading statements made by me on this application may prevent my employment or may be cause for dismissal if hired.

A complete application consists of: District Application  
Copy of Teacher Aide Certificate  
Official School Transcript

**To be considered for a position be sure all of the above are on file in our office as soon as possible.**