

**DISCLOSURE OF INTENT TO OBTAIN
CONSUMER REPORTS OR INVESTIGATIVE CONSUMER REPORTS**

For employment purposes, Imagine Schools may obtain consumer reports on you as an applicant or from time to time during employment. "Consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, etc.

For such employment purposes, Imagine Schools may also obtain investigative consumer reports. Some reference checks by a consumer reporting agency fall into this category. An "investigative consumer report" is a consumer report in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others. You have a right to request disclosure of the nature and scope of the investigation and to request a written summary of consumer rights.

AUTHORIZATION

I authorize Imagine Schools to obtain consumer reports and/or investigative consumer reports regarding me from time to time for employment purposes.

Signature: _____ Date: _____

Print Name: _____ SSN: _____

Driver's License Number: _____ State: _____

Other Driver's License Held in Past 5 Years: _____

Print Maiden or Other Names Under Which Records May be Listed: _____

Date of Birth (to be used only for proper identification): _____

If Imagine Schools requests an investigative consumer report and you would like to receive a disclosure of the nature and scope of the investigation and a written summary of consumer rights, check here:

Please Sign and Return this Page for Filing.

IMAGINE SCHOOLS

Authorization for the Release of Information

I hereby authorize the following organizations, individuals, and entities to furnish the company or its agents with any and all information and copies of records/transcripts pertaining to me, my activities, and/or my status for the purpose of possible employment with the company:

- Present and past employers
- Schools, colleges, universities, or other institutions of learning
- Law enforcement agencies and custodians of court records
- Branches of military service
- Drug Testing Agency
- Credit bureaus and financial reporting institutions
- Individuals who serve as references

I hereby hold harmless from liability the company and any other person(s) or agency and their employees and agents who may provide or discuss pertinent information in conjunction with any background investigation conducted for purposes of my potential employment at Imagine Schools, Inc.

I understand that Imagine schools will only use this information for employment reasons and all information will be kept in strictest confidence by the Imagine Schools corporate offices.

A machine copy of this authorization shall be considered as effective and valid as the original.

Please Print Clearly

Print Full Name: _____
Last First Middle

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State of License: _____

Other names used (including maiden name): _____

Current Address: _____
City State Zip

Phone (including area code): _____

Applicant's Signature: _____ Date: _____

Application for Employment

Please print legibly and complete all sections, indicating "n/a" if the information requested is not applicable.

Personal Data		
Name (last, first, middle):		Social Security Number:
Present Address (number and street)	City/State/Zip	How long have you resided there?
Previous Address (number and street)	City/State/Zip	How long did you reside there?
Home Phone Number	Mobile Phone Number	Personal Email Address
Are you over the age of 18? () yes () no If no, employment is subject to verification that you are of minimum legal age.		

Employment Objective		
Position Desired	Salary Desired	Location Desired

General Information	
How were you referred to us?	If you were referred by an employee, please list his/her name and location:
Have you ever been employed by Imagine Schools, Inc., CSES, Chancellor Beacon Academies, Inc., Chancellor Academies, Inc., and/or Beacon Education Management? () yes () no	
If yes, please list dates of employment. From: To:	
Have you ever been employed under any name other than the one stated in this application? () yes () no	If yes, please provide the other name(s).
Do you have any relatives or friends employed by Imagine Schools? () yes () no	If yes, please provide their name, relationship and location of employment.
Are you presently employed? () yes () no	If yes, what notice will be required? What date will you be available for employment?
Have you ever been involuntary terminated, not re-appointed or asked to resign from a previous job? () yes () no	If yes, please explain.

Certification					
Do you hold an Educator's Certificate? () yes () no					
If yes, please provide the following:					
Certification Type	Certificate Number	Valid from	Valid to	Issuing State	Subject, area or coverage
Certification Type	Certificate Number	Valid from	Valid to	Issuing State	Subject, area or coverage
If you do not hold an Educator's Certificate, are you eligible to receive one? () yes () no			Please explain.		
Have you ever had an Educator's Certificate suspended, revoked or not re-issued? () yes () no			If yes, please explain.		

Education Record					
School Name	Address (City/State)	Years Completed (Circle)	Major Field of Study	Graduated (Yes/No)	Degree
High School		1, 2, 3, 4			
College		1, 2, 3, 4			
College		1, 2, 3, 4			
Graduate School		1, 2, 3, 4			
Trade/Online School		1, 2, 3, 4			
Other		1, 2, 3, 4			
List academic honors, scholarships, and honorary fraternities.			List hobbies and outside interests.		
Do you plan to continue your education? () yes () no		If yes, please specify.			

Foreign Languages		Indicate degree of fluency.		
1.	Read _____ Write _____ Speak _____			
2.	Read _____ Write _____ Speak _____			

Business Skills	
Computer Hardware/Software Knowledge	Other Business Equipment
List any professional licenses you hold other than teaching certificates.	List any professional organizations in which you are a member.

Military Service		
Branch	Highest Rank Attained	Dates of Service
Special Training/Reserve Status		Did you receive anything other than an honorable discharge?

Driving Record - Answer these questions if driving is part of the duties and responsibilities of the job for which you are applying.			
Do you have a valid Driver's License? () yes () no	Issuing State	Driver's License Number	Expiration Date
Any restriction(s) on your license? () yes () no	If yes, please explain.		

Criminal Record	
Answering "yes" to these questions does not constitute an automatic bar of employment. Only those crimes which are substantially related to the position you are seeking will be considered.	
Have you ever been convicted, pled no contest, been placed on probation, enrolled in a pre-trial diversion program, or had adjudication withheld in a criminal offense, felony, misdemeanor or otherwise? () yes () no	
If yes, please give dates and details for each instance.	
Do you have any criminal charges currently pending? () yes () no	If yes, please explain.

Employment History - Complete in full. Do not attach a resume.

Please list below all present and past employment since graduation, including at least three past employers, for the last ten years.

Dates of Employment	Total Months	Reason for Leaving	Provide full description of responsibilities and duties.
Name of Employer		Type of Business	
Address/City/State/Zip		Phone	
Starting Position	Supervisor's Name, Title & Phone	Starting Salary	
Most Recent Position	Supervisor's Name, Title & Phone	Ending Salary	
May we contact? () yes () no	If not, why not?		
Dates of Employment	Total Months	Reason for Leaving	Provide full description of responsibilities and duties.
Name of Employer		Type of Business	
Address/City/State/Zip		Phone	
Starting Position	Supervisor's Name, Title & Phone	Starting Salary	
Most Recent Position	Supervisor's Name, Title & Phone	Ending Salary	
May we contact? () yes () no	If not, why not?		
Dates of Employment	Total Months	Reason for Leaving	Provide full description of responsibilities and duties.
Name of Employer		Type of Business	
Address/City/State/Zip		Phone	
Starting Position	Supervisor's Name, Title & Phone	Starting Salary	
Most Recent Position	Supervisor's Name, Title & Phone	Ending Salary	
May we contact? () yes () no	If not, why not?		

Please explain any gaps in your employment history:

Previous Experience

Please describe any previous experience that you have in the position for which you are applying, or in any similar or related position:

References

Please list three (3) individuals not related to you, whom you have known for at least one year, and who have observed your work performance (supervisors or employers, not co-workers).

Name	Relationship	Occupation	Phone Number	Years Known

Emergency Contact - In case of accident or other emergency, whom should we contact?

Name	Relationship	Home Phone	Cell Phone	
Address (Number and Street)		City	State	Zip
Place of Work (including address)			Work Phone	

**We are an Equal Opportunity Employer
APPLICANT'S STATEMENT**

By my signature below, I certify that all information that I have provided on this application, under separate cover and in any interview, as part of the application process, is true, complete and accurate. I understand that any false statements, omissions or misleading statements will be grounds to not hire me, and if discovered after employment, may subject me to dismissal.

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time, with or without notice or reason, and the Company/School has the same right. No one other than the CEO of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that Imagine Schools, Inc. reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the school may contact previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I understand the Company may obtain a consumer report or reports on me. I authorize Imagine Schools, Inc. and its representatives and agents to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, department of motor vehicle reports, and investigative consumer reports.

By my signature below, I certify that I have read and understand this statement.

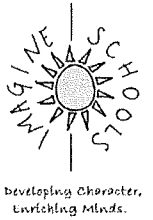
DO NOT SIGN until you have read and understand this statement.

_____ Date

_____ Applicant's Signature

This application will be considered active for a maximum of thirty (30) days. After that time, you must reapply.

Teachers' Sense of Efficacy Survey



Shared Values: Efficacy is the idea that the work you do is meaningful and has an effect. Tschannen-Moran and Woolfolk Hoy (2001) define three areas of efficacy for schools: student engagement, instructional strategies and classroom management. Teachers who have high levels of efficacy like their work (Fun), are more productive and build the culture of the school (Shared Values). The following tool provides information about teachers' sense of efficacy and is useful in determining the collective efficacy of the school. By aggregating the survey results, you can determine which areas are in greatest need overall and guide professional development, coaching and conversations leaders have with teachers.

Teacher Beliefs	How much can you do?								
	Nothing	Very Little	Some Influence	Quite a Bit	A Good Deal				
Directions (long form): Please indicate your opinion about each of the statements below. Your answers are confidential.									
1. How much can you do to get through to the most difficult students?	1	2	3	4	5	6	7	8	9
2. How much can you do to help your students think critically?	1	2	3	4	5	6	7	8	9
3. How much can you do to control disruptive behavior in the classroom?	1	2	3	4	5	6	7	8	9
4. How much can you do to motivate students who show low interest in school work?	1	2	3	4	5	6	7	8	9
5. To what extent can you make your expectations about student behavior clear?	1	2	3	4	5	6	7	8	9
6. How much can you do to get students to believe they can do well in their school work?	1	2	3	4	5	6	7	8	9
7. How well can you respond to difficult questions from your students?	1	2	3	4	5	6	7	8	9
8. How well can you establish routines to keep activities running smoothly?	1	2	3	4	5	6	7	8	9
9. How much can you do to help your students value learning?	1	2	3	4	5	6	7	8	9
10. How much can you gauge student comprehension of what you have taught?	1	2	3	4	5	6	7	8	9
11. To what extent can you craft good questions for your students?	1	2	3	4	5	6	7	8	9
12. How much can you do to foster student creativity?	1	2	3	4	5	6	7	8	9
13. How much can you do to get children to follow classroom rules?	1	2	3	4	5	6	7	8	9
14. How much can you do to improve the understanding of a student who is failing?	1	2	3	4	5	6	7	8	9
15. How much can you do to calm a student who is disruptive or noisy?	1	2	3	4	5	6	7	8	9
16. How well can you establish a classroom management system with each group of students?	1	2	3	4	5	6	7	8	9
17. How much can you do to adjust your lessons to the proper level for individual students?	1	2	3	4	5	6	7	8	9
18. How much can you use a variety of assessment strategies?	1	2	3	4	5	6	7	8	9
19. How well can you keep a few problem students from ruining an entire lesson?	1	2	3	4	5	6	7	8	9
20. To what extent can you provide an alternative explanation or example when students are confused?	1	2	3	4	5	6	7	8	9
21. How well can you respond to defiant students?	1	2	3	4	5	6	7	8	9
22. How much can you assist families in helping their children do well in school?	1	2	3	4	5	6	7	8	9
23. How well can you implement alternative strategies in your classroom?	1	2	3	4	5	6	7	8	9
24. How well can you provide appropriate challenges for very capable students?	1	2	3	4	5	6	7	8	9
25. How much can you improve your instructional techniques to become an effective teacher?	1	2	3	4	5	6	7	8	9
26. How much can you influence your colleagues to improve their craft?	1	2	3	4	5	6	7	8	9
27. To what extent are teachers born with instructional talent and "withitness"?	1	2	3	4	5	6	7	8	9
28. To what extent is engaging instruction an individual trait of a teacher?	1	2	3	4	5	6	7	8	9
29. How much do students get knowledge from their teachers' instruction?	1	2	3	4	5	6	7	8	9
30. How much do students get knowledge through their own inquiry?	1	2	3	4	5	6	7	8	9

Mission Statement

As a national family of public charter school campuses, Imagine Schools partners with parents and guardians in the education of their children by providing high quality schools that prepare students for lives of leadership, accomplishment, and exemplary character.
Academic Excellence Framework