Los Angeles Unified School District

APPLICATION FOR ASSIGNMENT AS COMMUNITY REPRESENTATIVE

			- -	/ /
Last Name	First	M.I.	Social Security Number	Birth Date

1. I understand that recent changes in the federal immigration laws (Immigration Reform and Control Act of 1986) require employers to verify and attest to the authorization of all new employees to work in the position offered. This requirement applies to all applicants. At the time of hiring, I must submit certain documentation in order to establish both my identity and employment authorization, for example, driver's license and social security card, or birth certificate or passport.

2. A. CONVICTIONS: I understand that if I have ever been (1) convicted or pled nolo contendere (no contest), or (2) fined, or (3) placed on probation for any violation of the law, either a misdemeanor or felony, regardless of any subsequent court action of dismissal or expungment, I must attach a statement on Form 6087, giving a full explanation, including dates, places, charges and disposition of all cases. (Do not include traffic violations such as faulty equipment, parking, hand signals or speeding.)

   B. PENDING COURT CASES: In addition to convictions, I must also list any pending criminal court cases on Form 6087.

   I request a copy of Form 6087. ☐ Yes ☐ No

   Verified by: Date:

3. I understand that, before I may be assigned to a District position, I must meet the health standards as required by the State of California. This includes a test for tuberculosis (chest X-ray or Mantoux skin test) pursuant to Education Code Section 49406 and certification from a licensed physician that my health meets state standards, in accordance with Education Code Section 44839, to perform in the position for which I am applying. I further understand that this is at my own personal expense.

4. I understand that, prior to employment, each new employee of the Los Angeles Unified School District must complete and sign the Oath of Allegiance required of all public employees by Section 3, Article XX, of the Constitution of the State of California.

5. I understand that prior to employment, each new employee must submit to fingerprint processing at the applicant's personal expense.

DECLARATION:
I declare under penalty of perjury that all information I have provided on this form is true and correct.

Applicants Signature: _____ Date: _____

Street Address	City	State	Zip Code	( ) Telephone Number

CERTIFICATION:
I certify the above-named person will perform the duties described in Policy Guide E-3 and will not render service normally included in the duty statements of classified, certificated or other unclassified employees, and I request the above individual be employed as a Community Representative.

Class Code (A, C, D, E)	Rate of Pay Per Hour	Hours Per Pay Period	Total Hours	Beginning Date	Ending Date

Signature of Administrator | Title | School / Office

Fund / Program Code | Telephone | Date

BUDGET AUTHORIZATION:

Fiscal Unit Approval | Fund | Program Code | Date