

## Gibbon Public Schools

P.O. Box 790

Gibbon, Nebraska 68840-0790

Larry Witt, Superintendent 308-468-6555

Troy Lurz, Secondary Principal 308-468-5721

Robert Alderson, Elementary Principal 308-468-6546

School Fax No. 308-468-5164

To Substitute Teachers:

Thank you for your interest in substituting at Gibbon Public Schools for the 2015-2016 school year.

I have enclosed a profile sheet to be completed and returned to me along with a copy of your teaching certificate. Once I have received this information, it will be entered into SubFinder and you will then be able to follow the directions enclosed to record your voice in order to be registered in the Aesop system.

Substitute pay at Gibbon is \$119.25 per full day.

Attached is my card. If you have any questions, please call don't hesitate to call.

Welcome to our school.

Carlia Brundage SubFinder Operator Gibbon Public Schools

## **GIBBON PUBLIC SCHOOLS**



## SUBFINDER SUBSTITUTE PROFILE

LAST NAME:					
FIRST NAME:					
E-MAIL:					
ADDRESS:					
CITY, ZIP:					
PHONE # TO BE NOTIFIED FOR	JOBS				
LAST 4 DIGITS OF SOCIAL SECURITY NUMBER:					
(for creating your pin #)					
Level you are willing to wo	ork at:	<b>Elementary Level</b>			
		Middle/High School Level			
		<b>Both Levels</b>			
AREA OF ENDORSEMENT_					
(Please attach a copy of your Teaching Certificate)					
Please circle any areas you would <b>NOT</b> agree to substitute in.					
ESL	Pre-Schoo	ol .			
Special Education	Music	Physical Education			

## Substitute Quick Start Guide for Aesúp

#### Logging in on the Web

To log in to Aesop, type www.frontlinek12.com/aesop in your web browser's address bar.



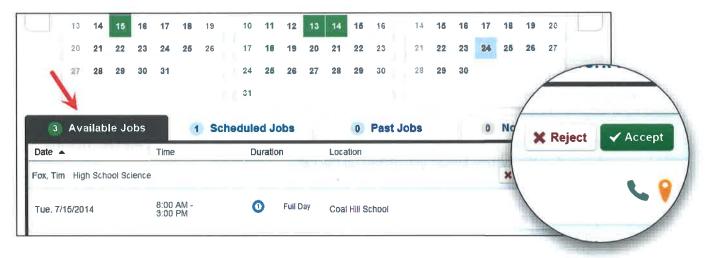
Enter your ID number and PIN, then click Login.

#### Can't remember your login info?

If you're having trouble logging in, click the "Forgot your login?" link next to the **Login** button for more information.

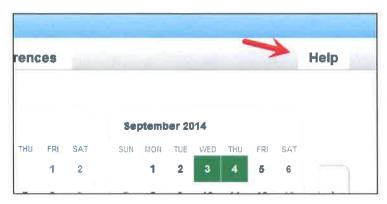
#### **Finding Available Jobs**

Aesop makes it easy to find available jobs right on the homepage. Jobs available for you to accept show in green on the calendar and in list form under the "Available Jobs" tab.



To accept a job, simply click the **Accept** button to next to the absence. If you do not want to accept this job, click the **Reject** button instead.

#### **Getting Help and Training**



If you have questions, want to learn more about a certain feature, or need more information about a specific topic, click the **Help** tab to go to the Aesop Learning Center to search Aesop's knowledge base of help and training materials.

## Substitute Quick Start Guide for Aesop

#### **Using Aesop on the Phone**

Not only is Aesop available on the web, but you can also find and accept available jobs, manage personal information, change your PIN number, and more, all over the phone.

#### When You Call Aesop

To call Aesop, dial **1-800-942-3767**. You'll be prompted to enter your ID number (followed by the # sign), then your PIN number (followed by the # sign).

When calling Aesop, you can:

- Find available jobs Press 1
- Review or cancel upcoming jobs Press 2
- Review or cancel a specific job Press 3
- Review or change your personal information Press 4

#### When Aesop Calls You

If an available job has not been filled by another substitute two days before the absence is scheduled to start, Aesop will automatically start calling substitutes in an effort to fill the job. Keep in mind, when Aesop calls you, it will be calling about one job at a time even if you're eligible for other jobs. You can always call into Aesop (see "When You Call Aesop" section above) to hear a list of all available jobs.

When Aesop calls you, be sure to say a loud and clear "Hello" after answering the call. This will ensure that the system knows you picked up the call.

When you receive a call from Aesop, you can:

- Listen to available jobs Press 1
- Prevent Aesop from calling again today Press 2
- Tell Aesop the Sub it is trying to reach is not available Press 3
- Prevent Aesop from ever calling again Press 9

If you are interested in the available job, **Press 1**. You will be asked to enter your PIN number (followed by the # sign). At this point, Aesop will list the job details and you will have the opportunity to accept or reject the job.



#### APPLICANT DISCLOSURE AND AUTHORIZATION FORM

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]
DISCLOSURE REGARDING BACKGROUND INVESTIGATION

GIBBON PUBLIC SCHOOLS may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, worker's compensation injuries, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by [One Source, The Background Check Company, PO Box 24148 Omaha, NE 68124, 1.800.608.3645] or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing [Employer] to obtain from any outside organization all manners of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

#### ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by [One Source, The Background Check Company, PO Box 24148 Omaha, NE 68124, 1.800.608.3645], another outside organization acting on behalf of GIBBON PUBLIC SCHOOLS and/or GIBBON PUBLIC SCHOOLS itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative	
consumer report requested by [Employer] by contacting the consumer reporting agency identified above directly	•

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. 

□

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

First	Middle
State of Driver's License	
	umber
Date:	
	Date of Birth* State of Driver's License Phone Ni

<sup>\*</sup>This information will be used for background screening purposes only and will not be used as hiring criteria.

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

# SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if: (a) a person has taken adverse action against you because of information in your credit report; (b) you are the victim of identity theft and place a fraud alert in your file; (c) your file contains inaccurate information as a result of fraud; (d) you are on public assistance; (e) you are unemployed but expect to apply for employment within 60 days. In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage

transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a

consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need - usually to consider an application with a creditor, insurer, employer, landlord, or other business. The

FCRA specifies those with a valid need for access.

- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General.

For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.	a. Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the Bureau:	b. Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above:  a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks  b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
o. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations  1. Federal Credit Unions	d, National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreact (DCCO) 1775 Duke Street Alexandria, VA 22314
Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Ave, Washington, DC 20590
6. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street SW, Washington, DC 20423
. Creditors Subject to Packers and Stockyards Act	Nearest Packers and Stockyards Administration area supervisor
Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 406 Third Street, SW, 8th Floor Washington, DC 20416
. Brokers and Dealers	Securities and Exchange Commission 100 F St NE Washington, DC 20549
. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and roduction Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 (877) 382-4357



# Division of Children and Family Services Request for Child and/or Adult Abuse and Neglect Central Register/ry Check(s)



#### INSTRUCTIONS

AUTHORIZATION

I hereby authorize the following information request from the Nebraska Adult Central Registry and/or the Nebraska Child Abuse and Neglect Central Register, which is maintained by the Division of Children and Family Services. Agencies agree to use the information to determine whether to hire or retain the individual to provide care, custody, treatment, transportation or supervision of children or vulnerable adults

All designated fields must be completed or the request will be returned and not processed. If this document is not typed, all information must be clearly printed and legible.

I authorize the Division of Children and Family Service Adult Protective Services Central Registry	es to conduct the following type(s) Child Protective Services Central	of checks: Register
TYPE OF CHECK		
Select only one:  ✓ Agency Requested Check  ☐ Self Check  Is this a request for an Adoption?  ✓ Yes	<b>A</b> No	in the second se
AGENCY INFORMATION: This section must be complete	ered if this is an agency request.	
Agency ID Number	Agency Name One Source The Background Che	ack Company
1022	One Source The Background Che	eck Company
APPLICANT INFORMATION		
First, Middle, Last Name		
Date of Birth	Age	Social Security Number
Current Address		
City	State	Zip Code
E-Mail Address (CFS will use this email as the primar		
Other names previously used such as former married	names, maiden name and nick na	ames used during the past 20 years



First Middle Last Name		
First, Middle, Last Name		
Names and birthdates of your children and o	children who lived with you	
varies and billindates of your children and t	Gillidien who lived war yea	
		a a
	92	
All previous addresses at which you have re	esided during the past 20 years (minimum City & State):	
		8
SIGNATURES & DATES		
This signature authorizes the Division of Ch information to myself or the designated age guardian signature is required if the applicar	nildren and Family Services to conduct the background ch ncy. This authorization is valid for a period of 6 mont nt is less than 19 years of age.	hs from the date of signature. Lega
Signature of Applicant		Date
Signature of Applicant's Legal Guar if applicant is less than 19 years of a	dian (Note: this signature is necessary only age).	Date
OF F OUTOW		
SELF CHECK Notary is required for Self-Check only.		
	Nishari Dishlia	
Seal of Notary	Notary Public	
AGENCY CHECK		
The undersigned Agency employee herebidentification documents.	y certifies that he or she has verified the identify of the ap	plicant by examining the applicant's
	1022	
Agency Employee Signature	Agency ID Number	Date