

HUMAN RESOURCES DEPARTMENT Katherine Gardner, Director

Mission: Mat-Su Borough School District prepares students for success

CO-CURRICULAR COACH/SPONSOR **Update -APPLICATION CHECKLIST**

PLEASE NOTE: **NO** coach/sponsor is authorized to begin the activity until they have completed the following required item and returned the completed packet to the Human Resource Department.

Please complete all items under required information and return this application to the Human Resources Department.

*****PLEASE PRINT APPLICATION AS A DOUBLE-SIDED DOCUMENT*****

REQUIRED INFORMATION

Completed Application

W-4 Form

Current Interested Person Report from Alaska State Troopers
(IPR is considered valid for **two** years from report date)

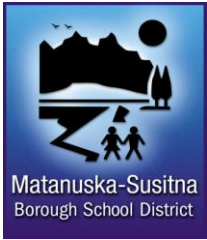
453 South Valley Way, Palmer, AK 99645 Hours: Monday - Friday 8:30 AM – 4:30 PM

To obtain you will need:

Alaska Drivers License or Alaska ID Card and **\$20.00** processing fee
(cash or check only, payable to the State of Alaska).

ADDITIONAL INFORMATION REQUIRED FOR HIGH SCHOOL COACHES/SPONSORS

Alaska School Activities Association (ASAA) Certification.
For more information please visit <http://asaa.org>
or contact the school where the activity you will be coaching is taking place.



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REFERENCES

PROVIDE 3 REFERENCES ABLE TO ATTEST TO YOUR SUITABILITY AS A SCHOOL EMPLOYEE (NOT RELATIVES):

Name:	Phone:
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Name:	Phone:
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Name:	Phone:
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AUTHORIZATION FOR PERSONAL INQUIRY

I hereby authorize you to furnish the Matanuska-Susitna Borough School District any and all information that you may have about me, including confidential personnel employment records and/or background check records and reports.

The information requested is to be used to assist the Human Resources Department in determining whether my qualifications and character are suitable for the position that I am seeking.

I hereby release you, your organization or other from any liability or damages which may result from furnishing the information requested.

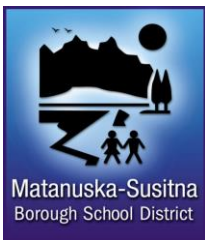
Printed Full Name

Signature

Date

MSBSD

Co Curricular Application 12.30.11



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CO-CURRICULAR UP-DATE APPLICATION

FULL LEGAL NAME	SOCIAL SECURITY NO.
MAILING ADDRESS	CITY, STATE, ZIP
HOME PHONE NUMBER	CELL PHONE NUMBER

EMERGENCY CONTACT INFORMATION		
NAME	RELATIONSHIP	CONTACT NUMBER

Have you previously received a **Co-Curricular** stipend contract as a Matanuska-Susitna Borough School District (MSBSD) coach/sponsor for an approved **Co-Curricular** activity?

 YES

 NO

If YES, indicate the activity and associated school years below:

Activity

School Year

_____	_____ - _____
_____	_____ - _____
_____	_____ - _____

Are you currently drawing a retirement from the Teachers' Retirement System (TRS) in the State of Alaska?

YES NO

If YES, date of retirement: _____

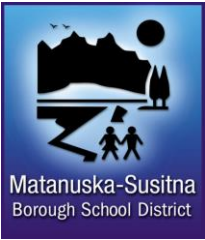
If NO, you are required to complete the included State Of Alaska Supplemental Annuity Plan (SBS) document.

Which school(s) will your coaching/sponsor activities take place at?

Names of any relatives by blood or marriage who are employed by the MSBSD or who serve on the MSBSD Board of Education

Name Relationship Department/Building

Name Relationship Department/Building



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CERTIFICATION OF APPLICATION

FULL LEGAL NAME	SOCIAL SECURITY NO.

Have you ever been involuntarily released, non-retained, or asked to resign for any reason? Yes No
 If yes, describe in full, and list the position

Have you ever been convicted of, or received a suspended imposition of sentence for, a misdemeanor?
 Yes No
 If yes, describe in full and list the date, city and state in which convicted.

Have you ever been convicted of, or received a suspended imposition of sentence for, a felony?
 Yes No
 If yes, describe in full and list the date, city and state in which convicted

BY SIGNING THIS APPLICATION I HEREBY CERTIFY that all information made on or in connection with this application is true and complete to the best of my knowledge and belief and that I have not knowingly withheld any fact or circumstance. I understand that any misrepresentation or concealment of material fact will be sufficient grounds for rejection of my application or my removal from employment. An inquiry may be made to include confirmation and information as to my character, general reputation, personal characteristics, previous employers, educational background, current and previous residence locations for the past five years, military service and conviction records. **I have never been involuntarily released from any position, non-retained, nor have I been asked to resign for any reason.** I have not committed any criminal act of child abuse or molestation or any sexual abuse of a minor; any act involving the illegal use or abuse of a controlled substance; any criminal act involving the use or abuse of alcohol; or any other crime of immorality (which means any act involving a crime of moral turpitude under the Laws of the State of Alaska). If I have been involved in any of the situations listed above, I have attached to this application a description of the events and an explanation why I believe such situation should not adversely affect my application for employment. I authorize my present and previous employers and listed references to release to the MSBSD any information they may have regarding my character, background, or my employment record. I release these individuals and their agents from any damage or claim for furnishing said information. I am aware that Alaska Statute 12.62.035 provides that an employer may obtain from the Alaska Commission on Criminal Justice a record of all convictions, and that a favorable record check will be a condition of any offer of employment made by the MSBSD. I understand that employment with the MSBSD requires the approval of the Human Resources Director or designee. Employment offers are made only by the District's Human Resources Department and must be ratified by the School Board.

 Signature _____ Date

THE MATANUSKA-SUSITNA BOROUGH SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER AND COMPLIES WITH TITLE IX OF THE EDUCATION AMENDMENT ACT OF 1972, with the Americans with Disabilities Act, and with all other state and federal employment laws. The District does not discriminate against any person on the basis of race, religion, color, national origin, age, disability, sex, marital status, changes in marital status, pregnancy or parenthood. Should you need any assistance for any reason during any stage of the employment process, please discuss your needs with a member of the Human Resources Staff. Every effort will be made to reasonably accommodate you in this process.

Form W-4 (2016)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2016 expires February 15, 2017. See Pub. 505, Tax Withholding and Estimated Tax.

Note: If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,050 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity income, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2016. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w4.

Personal Allowances Worksheet (Keep for your records.)

A	Enter "1" for yourself if no one else can claim you as a dependent	A	<input type="text"/>
B	Enter "1" if: <ul style="list-style-type: none"> • You are single and have only one job; or • You are married, have only one job, and your spouse does not work; or • Your wages from a second job or your spouse's wages (or the total of both) are \$1,500 or less. 	B	<input type="text"/>
C	Enter "1" for your spouse. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.)	C	<input type="text"/>
D	Enter number of dependents (other than your spouse or yourself) you will claim on your tax return	D	<input type="text"/>
E	Enter "1" if you will file as head of household on your tax return (see conditions under Head of household above)	E	<input type="text"/>
F	Enter "1" if you have at least \$2,000 of child or dependent care expenses for which you plan to claim a credit (Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)	F	<input type="text"/>
G	Child Tax Credit (including additional child tax credit). See Pub. 972, Child Tax Credit, for more information. <ul style="list-style-type: none"> • If your total income will be less than \$70,000 (\$100,000 if married), enter "2" for each eligible child; then less "1" if you have two to four eligible children or less "2" if you have five or more eligible children. • If your total income will be between \$70,000 and \$84,000 (\$100,000 and \$119,000 if married), enter "1" for each eligible child 	G	<input type="text"/>
H	Add lines A through G and enter total here. (Note: This may be different from the number of exemptions you claim on your tax return.) ▶	H	<input type="text"/>

For accuracy, complete all worksheets that apply.

- If you plan to itemize or claim adjustments to income and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.
- If you are single and have more than one job or are married and you and your spouse both work and the combined earnings from all jobs exceed \$50,000 (\$20,000 if married), see the **Two-Earners/Multiple Jobs Worksheet** on page 2 to avoid having too little tax withheld.
- If neither of the above situations applies, stop here and enter the number from line H on line 5 of Form W-4 below.

----- Separate here and give Form W-4 to your employer. Keep the top part for your records. -----

Form W-4 Department of the Treasury Internal Revenue Service	<h2>Employee's Withholding Allowance Certificate</h2> <p>▶ Whether you are entitled to claim a certain number of allowances or exemption from withholding is subject to review by the IRS. Your employer may be required to send a copy of this form to the IRS.</p>	OMB No. 1545-0074 <div style="font-size: 2em; font-weight: bold;">2016</div>
1 Your first name and middle initial <input style="width: 60%;" type="text"/> Last name <input style="width: 30%;" type="text"/>		2 Your social security number <input style="width: 100%;" type="text"/>
Home address (number and street or rural route) <input style="width: 90%;" type="text"/>		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. Note: If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.
City or town, state, and ZIP code <input style="width: 90%;" type="text"/>		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ▶ <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2)		5 <input style="width: 30%;" type="text"/>
6 Additional amount, if any, you want withheld from each paycheck		6 \$ <input style="width: 30%;" type="text"/>
7 I claim exemption from withholding for 2016, and I certify that I meet both of the following conditions for exemption. <ul style="list-style-type: none"> • Last year I had a right to a refund of all federal income tax withheld because I had no tax liability, and • This year I expect a refund of all federal income tax withheld because I expect to have no tax liability. If you meet both conditions, write "Exempt" here ▶		7 <input style="width: 30%;" type="text"/>
Under penalties of perjury, I declare that I have examined this certificate and, to the best of my knowledge and belief, it is true, correct, and complete.		
Employee's signature (This form is not valid unless you sign it.) ▶		Date ▶
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.)		9 Office code (optional)
10 Employer identification number (EIN)		

Deductions and Adjustments Worksheet

Note: Use this worksheet *only* if you plan to itemize deductions or claim certain credits or adjustments to income.

1	Enter an estimate of your 2016 itemized deductions. These include qualifying home mortgage interest, charitable contributions, state and local taxes, medical expenses in excess of 10% (7.5% if either you or your spouse was born before January 2, 1952) of your income, and miscellaneous deductions. For 2016, you may have to reduce your itemized deductions if your income is over \$311,300 and you are married filing jointly or are a qualifying widow(er); \$285,350 if you are head of household; \$259,400 if you are single and not head of household or a qualifying widow(er); or \$155,650 if you are married filing separately. See Pub. 505 for details	1	\$	<input type="text"/>
2	Enter: $\left\{ \begin{array}{l} \$12,600 \text{ if married filing jointly or qualifying widow(er)} \\ \$9,300 \text{ if head of household} \\ \$6,300 \text{ if single or married filing separately} \end{array} \right\}$	2	\$	<input type="text"/>
3	Subtract line 2 from line 1. If zero or less, enter “-0-”	3	\$	<input type="text"/>
4	Enter an estimate of your 2016 adjustments to income and any additional standard deduction (see Pub. 505)	4	\$	<input type="text"/>
5	Add lines 3 and 4 and enter the total. (Include any amount for credits from the <i>Converting Credits to Withholding Allowances for 2016 Form W-4</i> worksheet in Pub. 505.)	5	\$	<input type="text"/>
6	Enter an estimate of your 2016 nonwage income (such as dividends or interest)	6	\$	<input type="text"/>
7	Subtract line 6 from line 5. If zero or less, enter “-0-”	7	\$	<input type="text"/>
8	Divide the amount on line 7 by \$4,050 and enter the result here. Drop any fraction	8		<input type="text"/>
9	Enter the number from the Personal Allowances Worksheet , line H, page 1	9		<input type="text"/>
10	Add lines 8 and 9 and enter the total here. If you plan to use the Two-Earners/Multiple Jobs Worksheet , also enter this total on line 1 below. Otherwise, stop here and enter this total on Form W-4, line 5, page 1	10		<input type="text"/>

Two-Earners/Multiple Jobs Worksheet (See *Two earners or multiple jobs* on page 1.)

Note: Use this worksheet *only* if the instructions under line H on page 1 direct you here.

1	Enter the number from line H, page 1 (or from line 10 above if you used the Deductions and Adjustments Worksheet)	1	<input type="text"/>
2	Find the number in Table 1 below that applies to the LOWEST paying job and enter it here. However , if you are married filing jointly and wages from the highest paying job are \$65,000 or less, do not enter more than “3”	2	<input type="text"/>
3	If line 1 is more than or equal to line 2, subtract line 2 from line 1. Enter the result here (if zero, enter “-0-”) and on Form W-4, line 5, page 1. Do not use the rest of this worksheet	3	<input type="text"/>
Note: If line 1 is less than line 2, enter “-0-” on Form W-4, line 5, page 1. Complete lines 4 through 9 below to figure the additional withholding amount necessary to avoid a year-end tax bill.			
4	Enter the number from line 2 of this worksheet	4	<input type="text"/>
5	Enter the number from line 1 of this worksheet	5	<input type="text"/>
6	Subtract line 5 from line 4	6	<input type="text"/>
7	Find the amount in Table 2 below that applies to the HIGHEST paying job and enter it here	7	\$ <input type="text"/>
8	Multiply line 7 by line 6 and enter the result here. This is the additional annual withholding needed	8	\$ <input type="text"/>
9	Divide line 8 by the number of pay periods remaining in 2016. For example, divide by 25 if you are paid every two weeks and you complete this form on a date in January when there are 25 pay periods remaining in 2016. Enter the result here and on Form W-4, line 6, page 1. This is the additional amount to be withheld from each paycheck	9	\$ <input type="text"/>

Table 1

Table 2

Married Filing Jointly		All Others		Married Filing Jointly		All Others	
If wages from LOWEST paying job are—	Enter on line 2 above	If wages from LOWEST paying job are—	Enter on line 2 above	If wages from HIGHEST paying job are—	Enter on line 7 above	If wages from HIGHEST paying job are—	Enter on line 7 above
\$0 - \$6,000	0	\$0 - \$9,000	0	\$0 - \$75,000	\$610	\$0 - \$38,000	\$610
6,001 - 14,000	1	9,001 - 17,000	1	75,001 - 135,000	1,010	38,001 - 85,000	1,010
14,001 - 25,000	2	17,001 - 26,000	2	135,001 - 205,000	1,130	85,001 - 185,000	1,130
25,001 - 27,000	3	26,001 - 34,000	3	205,001 - 360,000	1,340	185,001 - 400,000	1,340
27,001 - 35,000	4	34,001 - 44,000	4	360,001 - 405,000	1,420	400,001 and over	1,600
35,001 - 44,000	5	44,001 - 75,000	5	405,001 and over	1,600		
44,001 - 55,000	6	75,001 - 85,000	6				
55,001 - 65,000	7	85,001 - 110,000	7				
65,001 - 75,000	8	110,001 - 125,000	8				
75,001 - 80,000	9	125,001 - 140,000	9				
80,001 - 100,000	10	140,001 and over	10				
100,001 - 115,000	11						
115,001 - 130,000	12						
130,001 - 140,000	13						
140,001 - 150,000	14						
150,001 and over	15						

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person who claims no withholding allowances; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.