

PUBLIC EDUCATION EMPLOYMENT EXPERIENCE

Employer	From	To	Your Job Title
Address	Ending Salary		Supervisor
Work Performed:			
Reason for Leaving:			

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Address	Ending Salary		Supervisor
Work Performed:			
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Work Performed:			
Reason for Leaving:			

OTHER EMPLOYMENT

Date of Employment	Name of Employer	Address	Position	Supervisor & Phone Number	Reason For Leaving

Awards, Recognition, and/or Community Service

Please forward the following information to our office.

1. Resume'
2. Transcripts
3. Copy of Certificates
4. References

Please complete the following in paragraph form.

1. Comment on your own personal goals and objectives.

2. Comment on your Philosophy of Education.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize the investigation of all statements contained in this application for employment, as may be necessary, in arriving at an employment decision.

This application for employment shall be considered active for a period of not to exceed 90 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

The applicant understands that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in being discharge from my teaching position. I understand, also, I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

DO NOT WRITE BELOW THIS LINE

Interview: Yes _____ No _____ Date : _____ Time: _____

Result of Interview:

Acceptable for Employment: Yes _____ No _____

Salary Step: _____ Salary Column: _____ Extra Hours _____

Occupation _____ Placement: _____ Start Date: _____

Interviewed by: _____ Approved by: _____