

Date

NORTON CITY SCHOOLS APPLICATION FOR EMPLOYMENT LICENSED POSITION

P.O. Box 498 Norton, VA 24273 Ph. 276/679-2330 276/679-4586 Fax 276/679-4315

Personnel	Use	On	ly
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□Transcripts

□Cert.

Applicant's full Name					
	(Last)	(First)	(M.I.)	(Ma	iden Name)
Other Name(s)					
(Please provide any additional information record.)	n relative to change of name,	use of an assumed nam	ne, or nickname necessary	to enable a check on y	our work or school
Present Mailing Address					
	(Street)	(City)	1	(State)	(Zip)
Permanent Mailing Address					
-	(Street)	(City)	1	(State)	(Zip)
Telephone Numbers:					
Present	Permanent		Work_		
Social Security Number		(1	Note: Completion of nu	umber is optional. F	ailure to submit

social security number on this form will not prohibit employment consideration. Social Security number may be required on other forms prior to employment.)

My signature below authorizes the school division to conduct a background investigation and authorizes release of information in connection with my application for employment This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other sources deemed appropriate in the sole discretion of the school division. I waive my right of access to any such information, and within limitation, hereby release the school division and the reference source from any liability in connection with its release or use. This release includes the sources cited above and illustrative examples as follows: the local Sheriff: information from the Central Criminal Records Exchange of either data on any criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Service Child Protective Services Unit and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I unconditionally certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I acknowledge that these questions shall be continuing in nature, and I have duty to update, change or further amplify my answers to guarantee accuracy at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted for employment I hereby agree to abide by the policies, regulations, and directives of the School Division.

Signature of Applicant

Mark the Appropriate Boxes:	Indicate Position(s) Desired for Which You are Endorsed:				
□ New Application	□ Teacher	□ Administrator			
□ Previous Application of File	□ Guidance	□ Supervisor			
□ Former Employee of the School Division	□ Library/Media	Psychologist			
Are you a U.S. citizen?	\Box Other (Explain)	□ Visiting Teacher/Social Worker			
☐ Yes ☐ No If not, are you eligible to work in the U.S.? ☐ Yes ☐ No	List Grade Level(s) and	d/or Subject Area(s) in Order of Preference			

FOR PERSONNEL USE ONLY

I. Educational and Professional Training (List chronologically.)

Level of Education	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation	Dates of Attendance From To
High School						
College or University						

II. Student Teaching Experience (List chronologically and include internships.)

Name of School	School Division City/County	State	Grade Level and/or Subject	Dates	Personnel Use

III. Teaching Experience (List chronologically all teaching experience. DO NOT INCLUDE SUBSTITUTE TEACHING.)

Name of School	School Division City/County	State	Position Held Grade Level and/or Subject	Dates Mo./Day/Yr. (From To)	Total Years	Full Time (X)	Part Time (X)	Personnel Use

IV. Administrative Experience (List chronologically.)

Employer	City/County	State	Administrative Experience	Dates of Employment	Personnel Use

V. Military Experience

Branch of Service	Occupational Specialty (MOS)	Inclusive Dates	Type or Discharge

The School Board is an Equal Opportunity Employer

VI. Certification

A.	If you have been issued a Virginia certificate, please submit a photocopy Copy enclosed? O Yes O No
	Type of VA Certificate: O Provisional O Collegiate Professional O Postgraduate Professional O Pupil Personnel O Tech. Year of Expiration of Virginia Certificate Endorsement(s) Endorsement(s)
	Have you applied for a Virginia Certificate? O Yes O No When? Check if statement of eligibility enclosed O
B.	If you have been issued a certificate in another state, please submit a photocopy. Copy enclosed? O Yes O No State Certification/Endorsements Cretification/Endorsements Certification/Endorsements Certification Certification/Endorsements Certification CertificationCERtificationCERtificationCERtificationCERtificationCERtificationCERtificat
	State Expiration Date Certification/Endorsements
C.	Have you taken the PRAXIS SERIES? O Yes O No (If yes, please submit a copy of your scores – indicate paper or computer test version.)
	Core Battery? O Yes O No Month Year Math Reading Writing Copy enclosed? O Yes O No
	Subject Area: O Yes O No
V	I. GENERAL INFORMATION
• -	Month, Day and Year Available for employment Are you under contract? O Yes O No
	If yes, where? Present position
	If presently employed, why do you wish to change?
	If under contract, what type: O Annual O Probationary O Continuing/Tenure O Other (explain)
	If under contract have you checked and can you be released if you are offered another position? O Yes O No
	If not under contract now, have you ever held a continuing contract in Virginia \circ Yes \circ No
	If yes, cite school division(s) and date(s)
	Referral source: O Advertisement/Posting O Employee O Friend O Other (explain)
	Have you ever been refused tenure or a continuing contract? (If yes, explain on back.)
	Have you ever been discharged, advised or requested to resign from a position? (If yes, explain on back.) \circ Yes \circ No
	Have you ever been convicted of a violation of law other than a minor traffic violation? (If yes, explain on back.) \circ Yes \circ No
	Have you ever had a certificate or license revoked or suspended? (If yes, explain on back.) \circ Yes \circ No
	Are any criminal or non-civil charges or proceedings pending against you? (If yes, explain on back.)
	Have you been convicted (as guilty or not innocent, or a determination of abuse or neglect <u>founded</u> against you) of any offense involving moral turpitude, the sexual molestation, physical or sexual abuse or rape of a child, or any like offense against an adult?
	(If yes, explain on back.) O Yes O No

VIII. References

It is the applicant's responsibility to have the following information provided the School Division in order to be considered for employment: (Please note that references may be contacted upon receipt of the application whether or not an opening exists.)

- A. Three references are required as a minimum and must include current employer if employed, or last employer if not currently employed.
- B. Unless included in Placement File, applicants with work experience must provide recommendations from principals and/or superintendents from all contracted educational work experiences within the past three years. If experience was not within the past three years, provide references from last contracted experience. Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement file or by listing names below.
- C. As indicated above, \bigcirc a Placement File is being sent, and/or \bigcirc references are listed below:

Name of Reference	Position/Relationship	Mailing Address	Phone

IX. Extracurricular Activities

Indicate the number of years experience in the activities listed below. Circle activities you are willing to coach/sponsor:

Extra Curricular Activity	High School Experience	College Experience	Contract Experience	Extra Curricular Activity	High School Experience	College Experience	Contract Experience
Football				IM Director			
Basketball				Athletic Director			
Baseball				Athletic Trainer			
Softball				Forensics			
Track				Debate			
Cross Country				Drama			
Wrestling				Yearbook			
Gymnastics				Newspaper			
Field Hockey				Literary Magazine			
Golf				Student Government			
Tennis				Cheerleaders			
Volleyball				Honor Society			
Soccer				Clubs			

X. Other Information

Are you able to perform the duties of the job for which you are applying? \bigcirc Yes \bigcirc No Estimate your total absence from work or school for the last three years and explain the reason(s):

Explain any physical or mental conditions which would adversely affect your ability to perform the duties of the position you seek; or if there are none, so state:

In your own handwriting, provide any additional information you desire that will afford an additional understanding of your qualifications. Your goals, objectives, philosophy, and other background factors are of special interest.

Additional Remarks and/or Explanations From Section VII – General Information

The School Board does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, handicapping conditions, or sex in its educational programs or employment. No person shall be denied employment solely because of any impairment, which is unrelated to the ability to engage in activities involved in the position or program for which application has been made.