



Employment Application

Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Phone Number: _____ Email Address: _____

Teaching Certificate / State / Subject area: _____

Are you currently under contract? _____ Yes _____ No

Date available for employment: _____

Education and Experience (List all experience with most recent first).

Teaching Experience:				
School and District	Address	Grade/Subject	Dates	Total Years
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Student Teaching Experience:				
School and District	Address	Grade/Subject	Dates	Total Years
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Extracurricular Experience (coaching, sponsorships, etc.):				
School and District	Address	Grade/Subject	Dates	Total Years
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

College and University:				
School	Location	Major	Degree	Total Years
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

High School: _____
Name Address

Honors and Activities:

Other related work experience:

Employer	Address	Work Assignment	Dates	Total Years

Professional References:

Name	Position	Address and Phone

Have you ever been convicted of a crime or pled guilty to a crime? Yes No

NOTE: This inquiry expressly excludes expunged and/or sealed records, and also excludes arrests. Answering "Yes" does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the offense, and position applied for will be taken into account.

If yes, please provide date(s) and details: _____

Signature of Applicant

Date

I certify that the answers given by me in this application are true and correct without omissions of any kind. I agree that the school shall not be held liable in any respect if my employment is terminated because of false statements, answers or omissions made by me in this application. I authorize the school to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation or governmental agency to disclose to the school any information they may have regarding me. In consideration of the review of this application, I hereby release the school as well as all providers of information from any liability and for any damage which may result from the furnishing and receiving this information. A copy of this authorization and release is as valid as the original and should be recognized as such.

Please send completed employment application to:
Diane Scott
Executive Assistant to the Head of School
240 S. Plant Avenue
Tampa, Florida 33606
dscott@stjohnseagles.org • 813-849-4200 ext. 4344