## BARBOURVILLE INDEPENDENT SCHOOLS P.O. BOX 520 BARBOURVILLE, KENTUCKY 40906

## **CERTIFIED TEACHING APPLICATION**

Date	Social Secur	ity Number/	_/Birthdate		
Last Name	First	Middle	Maiden		
Street Address			Cell Phone		
	State, Zip		Home Phone		
City, State, Zip			Home Phone		
Have you ever been e(Yes)(No) Were you dismissed	If yes, under what nate for cause?	ourville Independent Sc. me and when _(Yes)	hools: (No)		
Have you ever been e(Yes)(No) Were you dismissed if If yes, please explain	If yes, under what nate for cause?e	me and when	hools:(No) urville Independent School		
Have you ever been e(Yes)(No) Were you dismissed to If yes, please explain Are you related to the Yes	If yes, under what nate for cause?e	y member of the Barbon	hools:(No) urville Independent School		

EDUCATION				
HIGH SCHOOL				
COLLEGE			MAJOR:	
Certificate applied for:			MINOR:	
Certificate now held:	Type		Date of Application	
Type of contract now held,	Type	Issue Date	Expiration Date	
Appe of constact now move,			Expiration Date	
		:		
		1		
	onth and Year)	Rank at Discharge		
Period of Active Duty (Mo			Date of Final Discharge	

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

## EMPLOYMENT MOST RECENT FIRST

1.	
Name of Employer	Telephone Number
Address	Employed (Month and Year)
State job title and describe your work	
2	
Name of Employer	Telephone Number
Address	Employed (Month and Year)
State job title and describe your work	
3.	
Name of Employer	Telephone Number
Address	Employed (Month and Year)
State job title and describe your work	

•			hool district or governmental agency, new regulations
require the fo	llowing informa		1. Have you ever paid into KTRS?
			2. If answered yes to #1, has your account been
	105	1(0	withdrawn?
,		RI	EFERENCES
1			
Name			Position
Address			Phone
Name			Position
Address			Phone
	TE: For this type addition of employed		ment, state law requires a criminal record check as a
correct and co	omplete to the b	est of my kn	by me in this application for employment is true, owledge. I understand that if employed, any application shall be considered cause for dismissal.
through perso obtained, may written reque	onal interviews v y include charac	with my neig teristics and onable period	consumer report containing information obtained thbors, friends and acquaintances. This report, if mode of living. I understand I have the right to make a to receive additional detailed information about the
NOTE:	The following (1.) Certifica (2.) Official	te	must accompany this application:
Signature			Date