



**Employment Application**

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Salary Range Requirement: \_\_\_\_\_

Are you currently under contract? \_\_\_\_\_ Yes \_\_\_\_\_ No

Date available for employment: \_\_\_\_\_

Teaching Certificate / State / Subject area: \_\_\_\_\_

**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:**

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**Other related work experience:**

Employer	Address	Work Assignment	Dates	Total Years

**Professional References:**

Name	Position	Address and Phone

**Employment – Discharge or Suspension**

Have you ever been discharged, terminated, suspended, relieved from duty with or without pay, or placed on paid or unpaid administrative leave with regard to any disciplinary action or potential disciplinary action taken by any employer?

Yes  No If yes, please provide additional information.

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**Employment – Involuntary Resignation**

Have you ever been requested, formally or informally, to resign from or terminate employment?

Yes  No If yes, please provide additional information.

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Have you ever been convicted of a crime or pled guilty to a crime? *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.*

\_\_\_\_\_ Yes      \_\_\_\_\_ No    If yes, please provide additional information.

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\_\_\_\_\_  
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