3. Describe how you engage students in their learning.
4. Think about a unit you have taught. Tell why you selected particular instructional strategies to teach the curriculum.
5. Tell how your assessment practices accommodate students' learning needs.
6. How do you use technology during your instruction?

A copy of your Oklahoma Teaching Certificate(s)

Complete and up-to-date Official Transcript(s)

Verification of out of state experience

Form 214 – Verification of Military Service

Before this application can be evaluated, all requested information and materials must be received by the Personnel Office.

READ CAREFULLY BEFORE SIGNING

By affixing my signature I affirm that all information set forth in this application is accurate, truthful and complete. I understand that, if employed, false or misleading statements given in this application or interviews may result in discharge. I hereby grant permission to the Bethel Public Schools to investigate any information included in this application. I understand that this application is not a contract of employment. I hereby release the district and its agents from all liability in making any investigation and inquiry relative to information contained in the application form. I understand that I am required to abide by all rules and regulations and policies of the Bethel Public Schools, and I am required to perform all the essential functions of this position.

_____

Signature of Applicant Date

Bethel Public Schools does not discriminate on the basis of race, color, national origin, sex, age, qualified handicap or veteran. This institution is an equal opportunity employer.

Your application will be retained in our active file (1) one year from the date completed unless a written request is filed for retention beyond that date. We will need to be notified of any changes on the application throughout the year.

Please respond to the statements below as briefly, but as thoroughly, as possible. Your personal views are very important. Relate each statement to the particular position for which you are applying.
1. What do you do with students within the first weeks of the school year to establish a positive classroom environment?
2. Share your long and short-term planning process for instruction.

High School					
College or University (Undergraduate)					
College or University (Graduate)					
Other					
Other					
Major Area (Undergraduate)	Minor Area (Undergraduate)	Major Area (Graduate)		Minor Area (Graduate)	

PROFESSIONAL REFERENCES (List only those persons who are qualified to evaluate your qualifications for position sought. Include principals/superintendents of systems where experience was gained.)

NAME	TITLE	COLLEGE, SCHOOL, AND SCHOOL SYSTEM	ADDRESS, CITY, STATE, ZIP	PHONE
Cooperating Teacher				
College Advisor				
Other				
Other				
Other				
Other				

Do you have a relative who is either a member of the Bethel Board of Education or who is employed in any capacity with Bethel Public Schools? Yes ___ No ___ if yes, please give the following information:

Name of Relative _____ Relationship _____ Position _____

Have you ever:

A. Been employed by this school district? Yes ____ No _____

B. Resigned a position as part of an agreement to avoid dismissal? Yes ____ No _____

C. Been released from employment because of misconduct or unsatisfactory service? Yes ____ No _____

D. Been convicted of a state or federal felony offense? Yes ____ No _____

REQUIRED CREDENTIALS INCLUDED WITH THIS APPLICATION:

CREDENTIALS

Do you have placement office credentials on file? YES _____ NO _____ If "Yes", please request that they be sent to the Personnel Office.

EXPERIENCED CANDIDATES

TEACHING EXPERIENCE: (Include only regular teaching under contract – list most recent first)

DATES	Name, Address, and Zip of School District	Subject and/or Grades Taught
FROM TO YEARS		
Name of Principal	Final Year Salary	Reason for Leaving
DATES	Name, Address, and Zip of School District	Subject and/or Grades Taught
FROM TO YEARS		
Name of Principal	Final Year Salary	Reason for Leaving
DATES	Name, Address, and Zip of School District	Subject and/or Grades Taught
FROM TO YEARS		
Name of Principal	Final Year Salary	Reason for Leaving

Only teaching full time in college, teaching in a public school or in an accredited private school is creditable. Student teaching and substituting in most cases are not creditable. State law limits out-of-state experience to 5 years and military service experience to 5 years.

TOTAL NUMBER OF CREDITABLE YEARS | | |

EXTRACURRICULAR INTERESTS

Please indicate areas in which you have experience and/or ability to assist in an extracurricular program. This includes such areas as music, publications, and athletics. List both the areas and the specific activities for which you are qualified and willing to direct.

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

EDUCATIONAL BACKGROUND		ATTENDED		Degree Received	Date
NAME	LOCATION	From	To		

Bethel Public Schools

"AN EQUAL OPPORTUNITY EMPLOYER"

Professional Employee Application

Date of Application Month | Day | Year

PERSONAL DATA

Use legal name only

Last Name | Jr., etc. | First Name | MI

Social Security Number (Optional)

PERMANENT ADDRESS

House Number | Street or P.O. Box Number – Apt. Number | City | State | Zip Code

PRESENT ADDRESS (If Different)

House Number | Street or P.O. Box Number – Apt. Number | City | State | Zip Code

E-MAIL ADDRESS

HOME PHONE | CELL PHONE | WORK PHONE

MILITARY STATUS:	VETERAN YES_____ NO_____	ARMY_____AIR FORCE_____MARINE_____COAST GUARD_____NAVY_____	ACTIVE DUTY FROM___/___/___

Complete the following questions:

1. Are you currently under contract? . . . . . YES___NO___
   If "YES" where? _____
2. Do you posses a valid Oklahoma Teaching License/Certificate? . . . . . YES___NO___
   If "YES" Attach a copy
   If "NO" have you applied? _____
3. Have you previously applied with this district? . . . . . YES___NO___
4. When will you be available to start? . . . . . YES___NO___
5. Are you currently certified in another state(s)? . . . . . YES___NO___
   Where? _____ Type? _____ Subject or Grades? _____

List Area(s) of Certification:

Indicate in this section the area(s) for which you wish to be considered for employment. If you check more than one area, prioritize your preferences by using numbers 1, 2, 3, (1 is first choice: mark only the levels and subjects for which certified). Do not check or list any area for which you are not certified.

_____ A. Early Childhood

_____ B. Primary (Grades 1-3)

_____ C. Intermediate (Grades 4-5)

_____ D. Middle School (Grades 6-8)

_____ E. High School (Grades 9-12)

_____ F. Special Education

_____ G. Administration

_____
(List grade level in order of preference) Specify Subject

_____
(List grade level in order of preference) Specify Subject

_____
(List grade level in order of preference) Specify Subject

_____
(List grade level in order of preference) Specify Subject

_____
(List grade level in order of preference) Specify Subject

_____
(Grade(s) Exceptionality) Specify Subject

_____
(Specify Position/levels)

INEXPERIENCED CANDIDATES

STUDENT OR PRACTICE TEACHING: DATE STARTED _____

Grade or Subject Taught	No. of Weeks	Name and Address of School	1. College Supervisor 2. Cooperating Teacher