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 6/30/89 AASPA funding.



Bland County Public Schools Office of Personnel

361 Bears Trl.
 Bastian, Virginia 24314
 (276)688-3361

Personnel Use Only	
<input type="checkbox"/> Stu. Tchg.	NTE <input type="checkbox"/>
<input type="checkbox"/> Place. File	Core <input type="checkbox"/>
<input type="checkbox"/> References	Spec <input type="checkbox"/>
<input type="checkbox"/> Transcripts	Cert <input type="checkbox"/>

APPLICATION FOR EDUCATIONAL POSITIONS

Applicant's Full Name _____
(Last) (First) (M.I.) (Maiden Name)

Other Name(s) _____
(Please provide any additional information relative to change of name, use of an assumed name, or nickname, necessary to enable a check on your work or school record.)

Present Mailing Address _____
(Street) (City) (State) (Zip)

Permanent Mailing Address _____
(Street) (City) (State) (Zip)

Telephone Numbers:
 Present: () Permanent: () Work: ()

Social Security Number _____ (Note: Completion of number is optional. Failure 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 appropriate sources. I waive my right of access to any such information, and without 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 specific examples as follows: the local Sheriff, information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Services 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 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, and I understand that any omission, false answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school division.

Date _____ Signature of applicant _____

MARK THE APPROPRIATE BOXES:

- New Application
- Previous Application on File
- Former Employee of the School Division

Are you a U.S. citizen?

- Yes No

If not, are you eligible to work in the U.S.?

- Yes No

INDICATE POSITION(S) DESIRED FOR WHICH YOU ARE ENDORSED

- Teacher
- Guidance
- Library/Media
- Other (Explain) _____
- Administrator
- Supervisor
- Psychologist
- Visiting Teacher/Social Worker

List grade level(s) and/or subject area(s) in order of preference:

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 any 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 Grades and/or Subjects Taught (Specify)	Dates Mo./Day/Yr. (From...To)	Total years	Full Time (✓)	Part Time (✓)	Personnel Use
Total								

IV. WORK EXPERIENCE OTHER THAN TEACHING (List chronologically and attach a sheet if necessary.)

Employer	City/County	State	Kind of Work	Dates of Employment	Personnel Use

V. MILITARY EXPERIENCE

Branch of Service	Occupational Specialist (MOS)	Inclusive Dates	Type of Discharge

VI. CERTIFICATION

A. If you have been issued a Virginia certificate, **please submit a photocopy** Copy enclosed? No Yes

Type of Va. Certificate: Provisional Collegiate Professional PG Professional Pupil Personnel VIE

Year of Expiration of Virginia Certificate _____ Endorsement(s) _____

Have you applied for a Virginia certificate? No Yes When _____ Check if statement of eligibility enclosed

B. If you have been issued a certificate in another state, **please submit a photocopy**. Copy enclosed?No Yes

State _____ Expiration Date _____ Certification/Endorsements _____

State _____ Expiration Date _____ Certification/Endorsements _____

C. Have you taken the National Teacher's Examination? (If yes, please submit a copy of your scores.)

Core Battery: No Yes _____ Copy Enclosed? No Yes
Month Year CS GK PK

Speciality Area: No Yes _____ Copy Enclosed? No Yes
Month Year Subject Score

VII. GENERAL INFORMATION

Month, Day, and Year Available for employment _____ Are you under contract? No Yes

If yes, where? _____ Present Position _____

If presently employed, why do you wish to change? _____

If under contract, what type: Annual/Probationary Other (explain) _____ Continuing/Tenure

If under contract have you checked and can you be released if you are offered another position? Yes No

If not under contract now, have you ever held a continuing contract in Virginia? No Yes

If yes, cite school division(s) and date(s) _____

Referral Source: Advertisement/Posting Employee Friend Other (Explain) _____

Have you ever been refused tenure or a continuing contract? (If yes, explain on back.) No Yes

Have you ever been discharged or requested to resign from a position? (If yes, explain on back.) No Yes

Have you ever been convicted of a violation of law other than a minor traffic violation? (If yes, explain on back.) No Yes

Have you ever had a certificate or license revoked or suspended (If yes, explain on back.) No Yes

Are any criminal charges or proceedings pending against you? (If yes, explain on back.) No Yes

Have you been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? (If yes, explain on back.) No Yes

VIII. REFERENCES

It is **the applicant's responsibility** to have the following information provided the School Division in order to be considered for employment:

A. The names of at least three reference sources must be provided 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 co-operating teacher(s) in the placement file or by listing names below.

C. As indicated above, a Placement File is being sent, &/or references are listed below:

Name of Reference	Position/Relationship	Mailing Address	Phone Number
1.			
2.			
3.			

IX. EXTRACURRICULAR ACTIVITIES

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

Extra Curricular Activities	High School Experience	College Experience	Contract Experience		Extra Curricular Activities	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					Honor Society			
Volleyball					Clubs			
Soccer					Cheerleaders			

X. OTHER INFORMATION

To avoid conflict of interest, list any local school board member or employee relative(s) in the school division and cite relationship

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

(attach sheet if needed)

Bland County Public Schools does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following contact has been designated to handle inquiries regarding the nondiscrimination policies: Supervisor of Special Services, Bland County School Board, 361 Bears Trl., Bastian, VA 24314, (276) 688-3361.