

CERTIFIED TEACHER APPLICATION FORM

Current Date _____ Date Interviewed _____

Position for which applying K-6 K-8 9-12 Coach

Name _____ Social Security No. _____
LAST FIRST MIDDLE

Current Address _____ Phone (Area Code) _____

City _____ State _____ Zip Code _____

Permanent Address (if different from above) _____

Number where you can be reached during the day (Area Code) _____

Education Name and Location of School	Dates Attended	Date of Graduation	Degree
High School			
College			
Post Grad.			

Teaching Certificate's Held _____

Major Area _____ Minor Area _____

Teaching Experience (Start with the last position held)*

Name of School	Principal	Address	Phone (AC)	Subject	Grades
Student Teaching	Supervisor				

*Please indicate why you left each position _____

Are you presently under contract? _____ If yes, can you be released? _____

Are we free to check with present employer? _____

Write a paragraph on your philosophy of education **OR** your beliefs regarding discipline.

Activities you would be willing to supervise. _____

References: (List name, position, and address of someone who can attest to your skills as a teacher.)

Are you related to any present School Board Member? _____ If yes, list the name of the person(s) and relationship _____

Have you ever been convicted of a felony or are any felony charges pending against you? _____

If yes, give explanation, including whether you have been issued a pardon _____

The information on this application is correct to the best of my knowledge. I understand that providing false information on the application shall be grounds for dismissal, if hired. I hereby authorize the Berryhill Public School District I-10 to verify the above information.

Date

Signature of Applicant

The Berryhill Board of Education fully supports a policy of equal employment in all job classifications of Independent School District No. 10. Equal opportunity shall be provided for all regular employees and applications for employment on the basis of their demonstrated ability and competence without discrimination because of their race, color, religion, sex, national origin, age, or disability.

----- **For Office Use Only** -----

Criminal Check Run Date _____ Agency Used _____