



**Northumberland County Public School**  
**2172 Northumberland Highway, Lottsburg, Virginia 22511**  
**804-529-6134**

**APPLICATION FOR EMPLOYMENT**

(The information requested must be submitted on this application form. A resume or additional information may be attached as a supplement but may not be submitted in lieu of fully completing this application.)

<u>Personnel Use Only</u>	
<input type="checkbox"/> Stu.Tch.	Praxis I <input type="checkbox"/>
<input type="checkbox"/> Place File	Praxis II <input type="checkbox"/>
<input type="checkbox"/> References	Praxis III <input type="checkbox"/>
<input type="checkbox"/> Transcripts	License <input type="checkbox"/>

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

(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: ( )

**'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 sources deemed appropriate in the sole discretion of the school division. 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 illustrative 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 unconditionally 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. I acknowledge that these questions shall be continuing in nature, and I have a duty to update, change or further amplify my answers to guarantee accuracy at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application, or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted for employment, I hereby agree to abide by the policies, regulations, and directives of the school division.**

Date \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**MARK THE APPROPRIATE BOXES:** **INDICATE POSITIONS DESIRED FOR WHICH YOU ARE ENDORSED** \_\_\_\_\_

- 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
- 

- 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**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**I. LICENSURE**

A. If you have been issued a Virginia license, please submit a photocopy.....Copy enclosed?  Yes  No  
 Type of Virginia license: Provisional  Collegiate Professional  PG Professional  Pupil Personnel  Tech.

Year of expiration of Virginia license? \_\_\_\_\_ Endorsement(s) \_\_\_\_\_

Have you applied for a Virginia license? \_\_\_\_\_ When? \_\_\_\_\_ Check if statement of eligibility enclosed   
 Yes  No

B. If you have been issued a license in another state, please submit a photocopy.....Copy enclosed?  Yes  No  
 State \_\_\_\_\_ Expiration Date \_\_\_\_\_ Type and Endorsements \_\_\_\_\_  
 State \_\_\_\_\_ Expiration Date \_\_\_\_\_ Type and Endorsements \_\_\_\_\_

C. Are you presently under contract?  Yes  No If So, is your employer going to offer you a contract for next year?  Yes  No  
 If no, please explain \_\_\_\_\_

D. Have you taken the Praxis Assessments for Teachers? (If yes, please submit a copy of your scores/Indicate paper or computer test version)  
 PRAXIS I:  Yes  No Copy Enclosed?  Yes  No  
 \_\_\_\_\_  
 Month Year MATH READING WRITING  
 Subject Area:  Yes  No Copy Enclosed?  Yes  No  
 \_\_\_\_\_  
 Month Year Subject Score

**II. GENERAL INFORMATION**

Month, Day, and Year available for employment \_\_\_\_\_ Are you under contract?  Yes  No  
 If yes, where? \_\_\_\_\_ Present Position \_\_\_\_\_  
 If presently employed, why do you wish to change? \_\_\_\_\_  
 If under contract, what type: Annual/probationary  Continuing/Tenure  Other  (explain) \_\_\_\_\_  
 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?.....  Yes  No  
 If yes, cite school division(s) and date(s) \_\_\_\_\_  
 Referral Source: Advertisement/Posting  Employee  Friend  Other (Explain) \_\_\_\_\_  
 Have you ever been refused a continuing contract/tenure? (If yes, attach explanation)  Yes  No  
 Have you ever been discharged, advised or requested to resign from a position? (If yes, attach explanation)  Yes  No  
 Have you ever been the subject of consideration, recommendation, or action for nonrenewal of contract of employment?  Yes  No  
 Have you ever been convicted (as guilty or not innocent) of a violation of law other than a minor traffic violation? (If yes, attach explanation) (A State Police and FBI fingerprinting report will be completed upon employment or placement on any substitute list. This report will include any and all violations of law; therefore, failure to include all violations may result in denial of employment.)  Yes  No  
 Have you ever had any certificate, permit, or license revoked or suspended? (If yes, attach explanation)  Yes  No  
 Are any criminal or non-civil charges or proceedings pending against you? (If yes, attach explanation)  Yes  No  
 Have you been convicted (as guilty or not innocent, or a determination of abuse or neglect founded against you) of any offense involving moral turpitude, the sexual molestation, physical or sexual abuse or rape of a child, or any like offense against an adult? (If yes, explain on back)  Yes  No

**III. REFERENCES**

It is the applicant's responsibility to have the following information provided to the School Division in order to be considered for employment: (Please note that references may be contacted upon receipt of the application whether or not an opening exists.)  
 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 AND/OR  references are listed below:

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

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**IV. 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
Baseball				Athletic Director			
Basketball				Athletic Trainer			
Cross Country				Cheerleaders			
Field Hockey				Clubs			
Football				Debate			
Golf				Drama			
Gymnastics				Forensics			
Soccer				Honor Society			
Softball				Intramurals			
Tennis				Literary Magazine			
Track				Newspaper			
Volleyball				Student Gov.			
Wrestling				Yearbook			
Other				Other			

**V. OTHER INFORMATION**

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

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Are you able to perform all essential functions of the job for which you are applying with or without accommodation?  Yes  No  
 Describe your attendance record in objective terms, such as present 180 of 180 of the total days scheduled to work:

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***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.

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The School Board does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, disability, handicapping conditions, or sex in its educational program or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in essential activities involved in the position or program for which application has been made.

**VI. 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						

**VII. STUDENT TEACHING EXPERIENCE (List chronologically and include any internships, practicum's, field experiences)**

Name of School	School Division City/County	State	Grade Level and/or Subject	Dates	Personnel Use

**VIII. TEACHING EXPERIENCE (List chronologically all teaching experience, beginning with most recent. 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 <input type="checkbox"/>	Part Time <input type="checkbox"/>	Reason for Leaving
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
<b>Total</b>						If hired, when will you be eligible for continuing contract?		

**IX. WORK EXPERIENCE OTHER THAN TEACHING (List chronologically, beginning with most recent and attach a sheet if necessary.)**

Employer	City/County	State	Kind of Work	Dates of Employment	Reason for Leaving

**X. MILITARY EXPERIENCE**

Branch of Service	Occupational Specialist (MDS)	Inclusive Dates	Type of Discharge (Other than honorable or medical)

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