

# APPLICATION for PROFESSIONAL EMPLOYMENT

This application may be submitted to any school system in North Carolina listed on the webpage, <http://www.ncpublicschools.org/fbs/personnel/contacts/>. Please consult the list for the school system's address and the name of the individual to whom the application should be mailed. You may send a photocopy of your completed application, but the section on Nepotism on page 4 must be personalized for each system and each application must bear an original signature on page 4.

Application to \_\_\_\_\_ School System

Please complete this application in your own handwriting.

## Personal Information

Name \_\_\_\_\_  
Preferred Title First Middle/Maiden Last Nickname

Permanent Address \_\_\_\_\_  
Street City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Office (\_\_\_\_) \_\_\_\_\_ Contact (\_\_\_\_) \_\_\_\_\_

Temporary Address \_\_\_\_\_  
Street City State Zip

Home Phone (\_\_\_\_) \_\_\_\_\_ Office (\_\_\_\_) \_\_\_\_\_ Contact (\_\_\_\_) \_\_\_\_\_

From Date \_\_\_\_\_ Until Date \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ☐ New Applicant ☐ Former Applicant ☐ Former Employee

Positions for which application is being made (be specific). Applicant must be licensed or eligible for license in each area of choice. Examples: K-6, Art, 9-12 English, Exceptional Children—Mentally Handicapped, Social Worker, Principal, etc.

First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_

Third Choice \_\_\_\_\_ Date Available for Employment \_\_\_\_\_

Please state briefly your reason for wanting to teach in North Carolina. \_\_\_\_\_

## Licensure

North Carolina law requires that all teachers, principals, and other professional school personnel hold a valid North Carolina license. It is your responsibility to obtain and maintain your license in a current status. Please note that individuals qualifying for a North Carolina license based on reciprocity with another state are required to meet North Carolina's NTE/Praxis II requirements.

Do you hold a North Carolina License? ☐ Yes ☐ No If yes, please enclose a copy and please complete the information below.

Date License Issued Date Effective Date Expires

PROGRAM	LICENSURE AREA(S)	CLASS	EXPERIENCE
Example: 01 (initial)	78400 (6-9 Social Studies)	A	1 Year

Subject(s) in which you expect to receive a NC license (if you do not have one):

Other states in which you hold a valid teaching license/certificate. [Please send copy(s).]:

Educational Preparation							
Level of Education	Name of School or University	State	Field of Study	Type of Degree	GPA	Dates of Attendance	
						From	To
High School							
College							

Please enclose copies of all college transcripts.

Have you completed North Carolina Effective Teacher Training? ☐ Yes ☐ No If yes, please attach a photocopy of verification.

NTE/Praxis Examination Scores			
<p>North Carolina requires passing scores on NTE/Praxis examinations to qualify for a teaching license. Even individuals qualifying for a North Carolina license based on reciprocity with another state are required to meet North Carolina's NTE/Praxis II requirements. Please complete the section below indicating which tests you have taken and enclose a copy of your score report(s) for those you have taken.</p>			
<p>NTE Specialty Area(s) or Praxis II Examination <input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
_____ Month/Year	_____ Test code#/Test Name	_____ Score	Copy Enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____ Month/Year	_____ Test code#/Test Name	_____ Score	Copy Enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No
_____ Month/Year	_____ Test code#/Test Name	_____ Score	Copy Enclosed? <input type="checkbox"/> Yes <input type="checkbox"/> No

Student Teaching	
<p>If you completed student teaching within the last three years or are now student teaching, please supply the following information:</p>	
SCHOOL _____	Grade/Subject _____ Dates: From _____ To _____
Address _____ Phone No. _____	
SUPERVISING TEACHER _____	
Home Address _____ Phone No. _____	
COLLEGE SUPERVISOR _____	
College/University Address _____ Phone No. _____	
Home Address _____ Phone No. _____	

Teaching Experience (List chronologically all teaching experience. Do not include substitute teaching.)						
Name of School	Name of School System or Unit	State	Position Held Grades and/or Subjects Taught (Specify)	Dates Mo/Day/Yr (From ... To)	Total Years	Supervisor's Name & Phone No.

Have you ever achieved tenure in a North Carolina School system? If yes, when and where?

Work Experience Other Than Teaching (List Chronologically)				
Employer	Complete Mailing Address	Kind of Work	Dates of Employment	Supervisor's Name and Phone No.

References				
Each applicant must provide the following information to be considered for employment in a school system in North Carolina:				
<p>A. The names of at least four references sources. Include current employer if employed, or last employer if not currently employed. References from relatives or persons who can evaluate <u>only</u> your personality and character are not acceptable. References who have known you for at least four years and/or are substantially familiar with your education achievements and work history are preferred.</p> <p>B. Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement file and list names below.</p>				
Name of Reference	Position	Complete Mailing Address	Phone Number	
			Work	Home
1.				
2.				
3.				
4.				
May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable				
May we share your name/application with other school employers as they request referrals? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Additional Information	
Please check appropriate answers:	
Yes	No
<input type="checkbox"/>	<input type="checkbox"/> Have you ever been asked to resign from a position of employment or been dismissed, fired, discharged, suspended, or otherwise subject to disciplinary action?
<input type="checkbox"/>	<input type="checkbox"/> Have you ever had a teaching license or certificate suspended or revoked?
<input type="checkbox"/>	<input type="checkbox"/> Have you ever been convicted of any violation of the law other than a minor traffic ticket?
<input type="checkbox"/>	<input type="checkbox"/> Have you ever entered a plea of <u>nolo contendere</u> (no contest) to any charge against you?
<input type="checkbox"/>	<input type="checkbox"/> Do you have any criminal charges pending against you or are you currently involved in any criminal proceeding, including supervised or unsupervised probation?
If your answer to any of the above questions is yes, please explain on a separate page and include with this application.	
Driver's License Number _____ State _____ Class _____	

Related Activities	
Please list below those school activities in which you are interested and which you are qualified to supervise, coach, or direct. Please be specific about coaching experience. Use another page if needed.	
_____	_____
_____	_____
Other Interests/Hobbies _____	
Please list any subject which you may be qualified but not licensed or certified to teach. _____	

### Additional Information

Please use the space below to provide whatever additional information you would like to share about yourself. This information could be a short autobiography, additional information regarding your cultural and educational background, your preparation, experience, interests and hobbies, plans, recreational activities, travel, or community experiences with children. Please feel free to elaborate on information already given elsewhere in this application.

### Nepotism Policy

Most school systems in North Carolina have policies which prohibit placement of one member of a family in direct supervisory or evaluative relationship with another member of his/her family. "Family" is usually defined as wife, husband, sister, brother, son, daughter, mother, father, father-in-law, mother-in-law, son-in-law, or daughter-in-law. Please list below any family members who are currently employed in the system to which you are submitting this application.

Name

Relationship

### Applicant's Certification & Release of Liability

I, the undersigned applicant/employee hereby expressly authorize the Board of Education, its agents, and its employees to make any investigation of my personal or employment history, expressly including, but not limited to, federal and/or state criminal law enforcement, or traffic records, which may include confirmation by fingerprint identification. I further authorize any former employer, person, firm, corporation, credit agency, administrative body, or governmental agency to give to the Board of Education, its agents, or its employees any information they may have regarding me. In consideration of the review of my employment application by the Board of Education, its members, officers, agents, or its employees, I hereby release the Board of Education to which this application is submitted and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. If employed, I further authorize this Board of Education or its agents to provide information about my employment in this school system to future employers or prospective employers. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed original.

I have read the information contained in the application carefully and certify that the information I have given is correct and complete. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_