

NEWPORT, TENNESSEE

APPLICATION FOR EMPLOYMENT

**TEACHER**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **APPLICANT INFORMATION** | | | | | | | | | | | | | | | | | |
| Last Name | | | | | First Name | | | | | | | | | M.I. | Date: | | |
| Street Address Apartment/Unit # | | | | | | | | | | | | | | | | | |
| City | | | | | State | | | | | | | | | ZIP | | | |
| Phone | | | | | E-mail Address | | | | | | | | | | | | |
| Date Available: \_\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_ | | | | | Social Security No. | | | | | | | | | | | | |
| **POSITIONS DESIRED (for which you are certified to teach)** | | | | | | | | | | | | | | | | | |
|  | | GRADES PRE-K-3 | | GRADES 4-6 | | | | | GRADES 7-9 (SUBJECT) | | | | GRADES 10-12 (SUBJECT) | | | | |
| 1ST CHOICE | |  | |  | | | | |  | | | |  | | | | |
| 2ND CHOICE | |  | |  | | | | |  | | | |  | | | | |
| 3RD CHOICE | |  | |  | | | | |  | | | |  | | | | |
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| Are you a citizen of the United States? | | | | | YES | | NO | | | If no, are you authorized to work in the U.S.? | | | | | | YES | NO |
| Have you ever worked for this school system? | | | | | YES | | NO | | | If so, when? | | Dates: **From: To:** | | | | | |
| EducationAL BACKGROUND (BEGINNING WITH HIGH SCHOOL) official Transcripts are required Application will not be considered complete without applications being received at 305 Hedrick Drive, Newport, TN 37821, Attn: Melanie Eslinger | | | | | | | | | | | | | | | | | |
| **High School** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |
| **College** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |
| **College** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |
| **College** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |
| **College** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |
| **Other** |  | | | | | Address | | | | | | | | | | | |
| Attended From | To | | Did you graduate? | | | YES | | NO | | | Degree Earned: | | | | | | |

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| CERTIFICATION | | | | | | | | |
| nAME (As listed on tEACHING LICENSE) type   **License Number Date Issued Expiration Date**  **Subjects/Certificate Codes**  **Type of License: Pending College Submission to TDOE**  **Practitioner**  **Professional**  **Job-Embedded**  **Occupational**  **Other**     |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Previous Employment | | | | | | | Company | | | | Phone  ( ) | | | Address City State | | | | Supervisor | | | Job Title | | | | | | | Responsibilities | | | | | | | Employed From: To: | Reason for Leaving | | | | | | May we contact your previous supervisor for a reference? | | YES | | NO |  | | Company | | | | Phone  ( ) | | | Address City State | | | Supervisor | | | | Job Title | | | | | | | Responsibilities | | | | | | | Employed From: To: | Reason for Leaving | | | | | | May we contact your previous supervisor for a reference? | | YES | | NO |  | | Company | | | | Phone  ( ) | | | Address City State | | | | Supervisor | | | Job Title | | | | | | | Responsibilities | | | | | | | Employed From: To: | Reason for Leaving | | | | | | May we contact your previous supervisor for a reference? | | YES | | NO |  | | | | | | | | | |
| references | | | | | | | | |
|  | | | | | | | | |
| Full Name |  | | | | Relationship: | | | |
| Company |  | | | | Phone: ( ) | | | |
| Address |  | | | | | | | |
| Full Name |  | | | | Relationship | | | |
| Company |  | | | | Phone: ( ) | | | |
| Address |  | | | | | | | |
| Full Name |  | | | | Relationship | | | |
| Company |  | | | | Phone: ( ) | | | |
| Address |  | | | |  | | | |
| **TEACHING EXPERIENCE**- Regular or full time only (List in order, most recent first) | | | | | | | | |
| **SCHOOL** | | **ADDRESS** | | **PRINCIPAL** | | **GRADE AND/OR SUBJECT** | **SCHOOL YEAR** | **TOTAL MONTHS** |
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| **MILITARY SERVICE** | | | | | | | | |
| **Branch** | | | **Dates: From: To:** | | | | **Total Number of Years:** | |
| **Type of Discharge:** | | | | | | | | |
| **If other than Honorable, explain:** | | | | | | | | |
| **STUDENT TEACHING** (FOR APPLICANTS WITH LESS THAN TWO YEARS EXPERIENCE) | | | | | | | | |
| School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Grade or Subject Taught: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates: **\_\_\_\_/\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_**  Supervising Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Grade or Subject Taught: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates: **\_\_\_\_/\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_**  Supervising Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number: (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |

**Teachers: ARE YOU PREPARED TO?**

1. **Sponsor any extra-curricular activities? (If so, please write your choices in the box below)**

**Examples: STEM, Yearbook, School Newspaper, Forensic, Music, Cheerleaders, Senior Class, Drama Club, Service Club, Other Subject Matter Club**

1. **Coach Athletics (Specify):**
2. **Assist with any other activities (Specify):**
3. **Obtain additional licensure and certifications in hard to fill areas? Examples: middle school Mathematics, Science, Social Studies, and ELA, high school Mathematics, English, Biology, Chemistry, Physics, Earth Science, Foreign Languages, ESL, Special Education**
4. **Participate in School/District Level Leadership Teams as asked by your Principal or the Central Office? (Examples: Title I Parental Involvement, Leadership Team, Positive Schoolwide Behavior Team, or other stakeholder team)**

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| --- | --- |
| YES | NO |

IN YOUR HANDWRITING OR TYPED, MAKE A BRIEF STATEMENT DESCRIBING WHY YOU CHOSE TEACHING AS A PROFESSION

**DISCLAIMER**

I recognize that, if I am employed, the Cocke County Board of Education will assign or reassign me to a specific position as the need requires.

**PLEASE READ THE STATEMENTS BELOW AND CHECK THE APPROPRIATE BOX:**

I hereby certify that I **have OR have not**  been convicted of a misdemeanor or a felony in any state of the United States. *If “have” is indicated, explain fully the details of each such conviction on a separate sheet of paper.*

I hereby certify that I **have OR have not**  been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence, or insubordination as the same are defined in Section 49-1401 of the Tennessee Code. *If “have” is indicated, explain fully the details of each such dismissal on a separate sheet of paper. The employer’s non-renewal of a yearly contract need not be indicated unless the non-renewal was for cause as listed above.*

I hereby certify that I **am OR am not** related to a member of the school board, the director of schools, an administrator in the school system, a Cocke County commissioner, or any appointed or elected Cocke County official.

If my most recent employer were another Tennessee public school system and if my termination were voluntary, I hereby certify that my resignation was, or will be submitted at least 30 days prior to the beginning date stated hereon; or, if within 30 days, that the previous board has waived its’ right to such notice. A copy of my letter of resignation or of the said board action is attached or will be provided.

I understand that misrepresentation of any of these certifications may subject me to the penalties prescribed in Sections 49-1317 or 49-1318 of the Tennessee Code.

(Signature) (Hand Signature or Type Your Full Name

and the last four #’s of your Social Security as your signature)

Please Return This Application to:

**Cocke County Board of Education**

**305 Hedrick Drive**

**Newport, TN 37821**

**Attn: Melanie Eslinger**

**Or email the application and supporting documentation to: Melanie Eslinger** [**eslingerm@cocke.k12.tn.us**](mailto:eslingerm@cocke.k12.tn.us)

**NOTE: The Cocke County Board of Education requires the following:**

**1. (a) A completed application (this includes transcripts, background check, and this application)**

**(b) At least a Bachelor’s Degree**

**(c) College transcript(s)**

**(d) A Tennessee Teacher’s Certificate**

**(f) A current background check (please contact** [**eslingerm@cocke.k12.tn.us**](mailto:eslingerm@cocke.k12.tn.us) **for more information)**

**2. All documents filed herewith (except teacher’s certificate) become the property of the Cocke County, Tennessee Board of Education.**

**3. No reimbursement for expenses for applicant will be granted.**

**4. Successful applicants shall present a Physician’s Certificate showing satisfactory health record. District personnel shall respect the individual’s right to privacy and treat any medical diagnosis as confidential information. This certificate can be obtained by contacting Melanie Eslinger at** [**eslingerm@cocke.k12.tn.us**](mailto:eslingerm@cocke.k12.tn.us)**.**

**5. Upon acceptance of a contract, the applicant agrees to attend a New Teacher Orientation.**

**AN EQUAL OPPORTUNITY EMPLOYER  
It is the policy of the Department of Education to recruit, hire, and promote in all job classifications without regard to race, color, religion, sex, national origin, age, or handicapping conditions, except where it is necessary to meet a bona fide confidential qualification, DOE Form PER 112 (13 Aug 81)**

**DO NOT WRITE BELOW THIS LINE \*Applications will be retained for a period of one year from the date of receipt\***

**Date Application Acknowledged: \_\_\_\_/\_\_\_\_/\_\_\_\_**

**Date Application Approved by Central Office: \_\_\_\_/\_\_\_\_/\_\_\_\_**

**Approving Supervisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­**

**\*References are to be checked by the building Principal.**