

COCKE COUNTY, TENNESSEE

APPLICATION FOR EMPLOYMENT

**Substitute Teacher**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **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.: | | | | | | | | | | |
| Would you accept work anywhere in the county? YES  NO | | | | | | | | | | | | | |
| 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: **\_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_** | | | | |
| Have you ever been convicted of a felony? | | | YES | | NO | | If yes, explain | |  | | | | |
| EducationAL BACKGROUND (IN ORDER, BEGINNING WITH HIGH SCHOOL) official Transcripts are required | | | | | | | | | | | | | |
| **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: | | | | | |
| **Other** |  | | | Address | | | | | | | | | |
| Attended From  / / | To  / / | Did you graduate? | | YES | | NO | | Degree Earned: | | | | | |
| **List Which Schools You are Willing to Substitute With:** | | | | | | | | | | | | | |
| **Bridgeport**  **Centerview**  **Cosby Elementary**  **Coby High School**  **Cocke County High**  **Grassy Fork**  **Northwest**  **Parrottsville**  **Del Rio**  **Edgemont**  **Smoky Mountain**  **Alternative School**  **All Schools**   **Other places as needed** | | | | | | | | | | | | | |
| **Licensure (if applicable)** | | | | | | | | | | | | | |
| **I have an expired teaching license**  **TLN #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **I have a current teaching license**  **TLN #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **I have a bachelor’s degree**  **Degree Area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | |

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| references | | |
|  | | |
| Full Name |  | Relationship: |
| Company |  | Phone: ( ) |
| Address |  | |
| Full Name |  | Relationship |
| Company |  | Phone: ( ) |
| Address |  | |
| Full Name |  | Relationship |
| Company |  | Phone: ( ) |
| Address |  |  |

**Employment History**

|  |  |  |
| --- | --- | --- |
| Company |  | Supervisor: From: To: |
| Address |  | Phone: ( ) |
| Title/Responsibilities |  | |
| Company |  | Supervisor: From: To: |
| Address |  | Phone: ( ) |
| Title/Responsibilities |  | |
| Company |  | Supervisor: From: To: |
| Address |  | Phone: ( ) |
| Title/Responsibilities |  |  |

**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.

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 typed name

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

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**

**(b) At least a High School Diploma or equivalent**

**(c) Transcripts (if any college courses have been attended)**

**(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 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)**.**

**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 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­**