APPLICATION FOR TEACHING POSITION

AVOYELLES PARISH SCHOOL BOARD



221 TUNICA DRIVE WEST MARKSVILLE, LA 71351 (318) 253-5982

	Date of App	olication:			
A A A A A	Social Secui	rity Number:			
	Teacher Ce	rtificate: Type	No	No	
	Teaching A	areas Certified:			
	· ·				
Name: (Last)	(First)	M1)	(Maiden)	
Present Address:					
Permanent Address:					
Telephone:		_			
E-Mail:					
Birthplace:		Birth Date:			
	Profession	nal Training			
N CIII-l-C-l1		-	(() 1		
Name of High School:		Year	of Graduation:		
Colleges and Universities	Major	Minor	Degree	Year of Graduation	
	,				
Note: Attach copy of teaching certification	ate or official transcrip	t showing the awarding	g of a Bachelor's	Degree.	
NTE Scores: GK: CS	. DV	ADEA			
or PRAXIS Exams: (Must have Praxi					
and GPA 2.20 or above for employme	•				
or Core Academic Skills: Yes N	o (If yes, attach	a copy.) Completed P	raxis Content: Y	es No	
AREA:					
1. Do you know of any reason(s) why	you cannot perform th	ne essential function(s) o	of the job you are	e applying for?	
Yes No					
Please Explain:	N.T.			_	
 Have you ever been arrested? Yes Have you ever been convicted of a f 		aco2 Voc No			
3. Have you ever been convicted of a f 4. If so, have you been pardoned? Yes	•				

TEACHING EXPERIENCE
(Do not include substitute teaching experience)

	on not include substitute teach	ııng experiei	ice)	
School and Address	Grade or Subjects Taugh		Dates of Service	Number of Years
Total Years of Teaching Experience:				
Indicate Participation in the PIP Program:	Ves No			
maneute l'articipation in the l'11 l'Iogiani.	10			
	OTHER WORK EXPER	IENCE		
List any other work experience which you h		LITCL		
Name of Employer	Position Held		DL	- Nr. 1
Traine of Employer	1 osition Heid		Phon	e Number
,				
Activo Military Comico	V			**************************************
Active Military Service:	rears;	_ Month(s).	Attach a copy o	f DD-214 Form.
	DEFEDENCES			
Give three references professibly superinten	<u>REFERENCES</u>	1 11		
Give three references, preferably superinten	dents, principals, supervisors, an	d college prof	essors, who have firs	t-hand knowledge of
your character, personality, scholarship, and				
Name of Employer	Position Held		Phone	e Number
	OTHER			
1. It is necessary that you have a criminal record	check as per the Louisiana Child Prot	ection Act. Plea	se check with the Avov	elles Parish Personnel
Department for more information.				
2. You are asked to take a copy of your application	on to each school principal of your cho	oice. This appli	cation is to be renewed o	on an annual basis (prior
to the beginning of each school year).				
3. The Avoyelles Parish School Board, in complia	nce with R.S. 17:391.5H, Act 506, will	request evaluat	ion results of profession	al personnel as part of the
application process. You have the opportunity to	review these and provide and respon	ise you deem ar	opropriate. Please subm	it below and other
information which you feel would help us to eval	uate your application for a teaching p	osition.		
~				
Signature of Applicant:				

KAREN TUTOR, SUPERINTENDENT THELMA J. PRATER, ASSISTANT SUPERINTENDENT

221 TUNICA DRIVE WEST, MARKSVILLE, LA 71351 TEL 318-253-5982 FAX 318-253-9680

DOCUMENTATION REQUIRED FOR PROFESSIONAL EMPLOYMENT

Checklist		
	Application (attached)	Resume
	Copy of current Louisiana certificate or O	ut of State certificate
	Copy of professional license (Social Work Nurse/Physical Therapist/or Psychologist	
	Military Credit: Attach copy of DD-214 For teaching experience will be given for mili	
1100	PL2 , PL3, Ancillary certificate or Out of State, C) Certificate, Add a degree or Area of certifi	te Certificate; Update a Level (1, 2, 3) Certificate or cation the following will be needed:
	Official transcript (s)	
	Praxis and/or ACT or SAT score report (A SAT combined verbal/critical reading and used in lieu of Praxis 1 PPST Exams or Coi in reading, writing and math by prospect	math score of 1030 may be e Academic Skills for Educators
	Letter from university verifying admission (PL applicants - Practitioner License)	n to a teacher education program
	Processing Fee: Payable to <u>LA Departme</u> (Renewing a certificate, adding a degree	ent of Education (Initial certificate - \$50) or other updates - \$25)
At time of hire, the follo	owing must be done:	
Finge	erprinting and Drug Testing (See the Reco	eptionist)
Com	plete a Payroll Packet (Finance and Insur	ance Department)
Verifi	cation of Previous Experience (Personnel-	Curriculum and Instruction)

PLEASE TYPE OR PRINT IN INK

PROFESSIONAL CONDUCT FORM

(All questions must be answered)

NAME OF APPLICANT: (Include First, Middle, Maiden, and Married)	Social S	Social Security Number:	
DDRESS: DATE O		F BIRTH:	
Each Question must be answered:		Please Check YES NO	
Have you ever had any professional license/certificate denied, suspend or voluntarily surrendered? If YES, in which state?	ed, revoked,		
 Are you currently being reviewed or investigated for purposes of such a stated in #1 or is such action pending? If YES, in which state? 	ction as		
3. Have you ever been convicted of any felony offense, been found guilty plea of <i>nolo contendere</i> (no contest), even if adjudication was withheld	or entered a ?		
If yes, please provide the following information:			
Date of Conviction:			
State of Conviction: Court Jurisdiction of Conviction:			
 4. Have you ever been convicted of a misdemeanor offense that involves following: a. Sexual or physical abuse of a minor child or other illegal conduct child. b. The possession, use, or distribution of any illegal drug as defined or federal law. 	with a minor		
5. Have you ever been granted a pardon or expungement* for any offense #3 or #4?	e as stated in		
NOTICEEXPUNGEMENTS, FIRST OFFENDER PARDONS Background Checks (CBCs) conducted for purposes of employin La. R.S. 17:15 and La. R.S. 15:587.1. Pursuant to Louisiana law sclose ALL ARRESTS, COURT ACTION and CONVICTIONS, (Including fender pardons and pre-trial diversion), and a copy of the report epartment of Education (LDE), in addition to the potential employer or	nent will be co R.S. 15:587.1 but not limit t shall be pi LA Educatio	nducted in 1., backgro ed to expo rovided to n Agency	accordance bund checks s ungements, to the Louisi (LEAs)s.
er BESE policy set forth in Bulletin 746, Louisiana Standards for State Certifullure to disclose actions such as first offender pardons, pre-trial diversion, expension and or revocation."			
you answered "YES" to any questions, #1 through #5, you must provide of proceedings, civil records of Federal, State and/or District School Board at provide full disclosure of the nature and circumstances of EACH separate	d actions, or o	ther releva	ant document
at provide fail disclosure of the flatare and circumstances of EAST separate		rough #5	abovo ie tru
affirm and declare that all information given by me in the responses to creet, and complete to the best of my knowledge. I understand that mission or addition, may result in criminal prosecution and/or the certificate. I agree that my electronic signature as entered below is ignature on this document.	t any misrepi denial or rev	resentatio rocation o	n of facts, b of my teache