

TCSB #00012

**Taylor County School Board** 318 N. Clark St. • Perry, Florida 32347 Phone 850-838-2500 • Fax 850-838-2501

## **Application for Instructional Position**

Name	FIRST	MII	DDLE	_	Date	
Present Address		CITY		- 710 CODE	Phone	
		CITY	STATE	ZIP CODE	Phone	
Permanent Address		CITY	STATE	ZIP CODE		
Email Address						
Social Security No. XXX–XX–(only last 4 digits)	Sex: Male Female  Date of Birth	d for record-keeping onl Ethnicity: H-DAY-YEAR		Asian Black/Ame Hispanic Native Ame Native Hav	not be used in employment deci rican African erican/Alaskan Native vaiian or other Pacific Islan n-Hispanic	
Present Position?				_Salary?		
Are you a citizen of the U.S.?	Length of residence in Taylo	or County?		in F	·lorida?	_
Are you multilingual? Yes No	What language(s) c	do you speak?			_	
Have you ever been bonded?	By what company?		_ Has bo	nd ever be	en refused you?	
In case of accident, notifyNAME		DEI ATIONIC	LID		PHONE NUMBER	
Address of person to notify	STREET				STATE	ZIP
What subjects or grades are you certified						ΣIΓ
Designate subject or grade for which yo	ou are applying by choice. (	1)	(2)		(3)	
When can you start to work?						
Have you ever been removed or dismisso	ed from any position?	If yes, expla	ain			_
Florida Teacher's Certificate		Do you have a pr	ior crimir	nal convicti	ion record?	
Professional Tempor	ary	If so, when				
Certificate Status: Current	Expired					
Number						
Date Issued						
Expiration Date						
Subject and grades covered						
			learance	has been r	l not be processed until received from FDLE/FBI pu tute 231.02(c)	rsuant to

## Pocord N/III

	Mi	litary	Serv	ice Re	cord						
Branch of Service		Inclusive	Dates To	Beginnin	g Rank	Rank at D	ischarge	Type of	Discharge		
				1							
(In disable wheath on an action	4						- filed fee ne	:			
(Indicate whether on active are you a veteran as defined by s. 29	•		-			apers must b	e nied for po	ssible salary	credit.)		
Are you claiming Veterans' Preference				110							
f you are claiming Veterans' Prefei following conflicts: Korean Conflict, Florida Statutes).	rence, please in	dicate the p	orovision ι				-	-			
f you state that you were "A vetera	n of any war,"	please indic	cate the w	ar here:							
<b>Note:</b> In order to receive Veterans' showing military status, dates of APPLICATION. Spouses, widows, or documents in order to receive such	service and dis widowers quali	charge typ	e or othe eterans' E	er type of	proof fron	n the DD o	VA MUST	BE SUBMITT	TED WITH TH		
ist at least three references, includi haracter, personality, scholarship, a		-		rences der whom y	ou have ta	ught, who ha	ve first-hand	knowledge	of your		
Name			Addre	ess			Official Position				
1.											
2.											
3.											
	Educat	tion an	nd Pro	fessio	nal Tra	ining					
Name of School or Institution	Add	lress		Course	Degree Diploi Receiv	ma Dat	e Time Spent		I ~		
High School									Spec. Sem. Hi or Qrt. Hrs.		
College											
University											
Graduate Work					1						
Special											
Special					<u> </u>						
	Cre	denti	als Aı	re On	File A	ıt:					
Name of Institution			Street A	Address			City and State				
					<u> </u>						
Are any members of your family em	ployed by the So	chool Board	of Taylor	County?					_		

## **Experience**

If service is less than one year, give the number of days taught if possible.

Name of School or Institution	Address of School	Public School	Non- Public School	Grade or Subject Taught	County System	City System	Dates Taught From To	Number of Months	Salary	Your Name Under Which Employed

## Other Activities

List hobbies, professional recognitions, committee work, articles for publications, community and church activities, etc.:
List any training programs where you have been trained as the trainer:
Underscore any of the following services in which you have had experience or training: Counseling, Guidance, Testing and Assessment, School Finance, School Paper, School Yearbook, Elementary School Library, Audio-Visual Aids, Debate, School Plays, Clubs, Football, Basketball, Baseball, Softball, Volleyball, Soccer, Cheerleading, Track, Tennis, Swimming, Calisthenics, Playground Activities.
Technology Literacy: Please list the technology areas in which you are proficient (word processing, spreadsheets, interactive white boards, document cameras, etc.).
Certification Statement
The above are true and accurate statements to the best of my knowledge and belief. I am not aware of any purposeful omissions or false statements. I also understand that unless this application is completed in detail it will not be considered.
If employed, I agree to abide by applicable rules and regulation of said system. My answers to the foregoing questions are given to induce the Taylor County School Board to employee me and false statements will be considered sufficient cause for my dismissal in the event this application results in my employment. I understand the answers given by me are subject to verification and are true to the best of my knowledge and belief.
DateSignature
Information for Applicants  We operate on a referral system. Your application will be filed in our central office. Administrators in need of teachers will consult the application
file and consider applications from this file.
For additional information, please use a separate sheet. A description of any original work, either in education or related fields to your work applied for, will be helpful.
An interview is always desirable, and in fact, is frequently required. However, candidates are advised to communicate with this office before going to any considerable expenditure of time or money in seeking an interview. The request to come for an interview in no way implies the applicant will be employed.
The sending of a blank application does not imply the candidate is under consideration for immediate appointment. Applicants should expect to receive information concerning their application only if being considered for an appointment. Applications are kept on file two years after date of receipt by this office.
Board Policy on Employment and Assignment
We do not believe we can teach democracy in our schools without demonstrating our belief in democracy in the way the schools are operated.
If employed, you will be expected to teach or work cooperatively with other employees, to teach pupils, and to supervise or be supervised in your work by other employees without regard for the race, color, religion, age, sex, national origin, marital status, disability, genetic information, sexual orientation, gender identity or expression, or any other reason prohibited by law, of any individual. This is an equal opportunity school system and should be understood as such by all persons connected with it.
It is the policy of this Board all positions are open to applicants regardless of race, color, religion, age, sex, national origin, marital status, disability, genetic information, sexual orientation, gender identity or expression, or any other reason prohibited by law, and every effort will be made to secure the best qualified person for each vacancy.
I will read and adhere to the Board Policies if I am accepted for employment.
I further agree any omissions or false statements in this application will constitute reason for dismissal. I also understand unless this application is completed in detail it will not be considered.

Date\_\_\_\_\_Signature of Applicant\_\_\_