CONECUH COUNTY BOARD OF EDUCATION 1455 TED BATES ROAD

EVERGREEN, AL 36401

Telephone (251) 578-1752

Fax (251)578-706	1			TO OF
	Application for	Instructional S	taff	
		Position(s) De	sired (Check One	or More)
Date		Teacher Coac	•	lministrator
Name			Social Security	No
Last	First	Middle		
Present Address				
	Street	City	State	Zip Code
Permanent Addres	S			
	Street	City	State	Zip Code
		DEGREE (S) (List all)	
Area Code Telepho	me	- (, (,	
What kind of valid Ala	abama certificate do you	hold? Type:	Valid Period:_	or
Do you plan to apply f	or an Alabama certificate	e: Type	: After:	(date) or
Have you ever held an	Alabama certificate?	Date is	ssued:Type	
What majors are show	n on your certificate?			
What minors, if any ar	e shown on your certifica	nte?		
Position Desired:				
If secondary, list choice	ce	If elementary	, list choice of grades	
of subjects in order of	preference:	in order of p		
1		1		
2		2		
3		3		
SPECIAL EDUCA	ATIONEmotion	nally Disabled _	Gifted	Hearing Impaired
	Learning	Disabilities		dVisually Impaired
	Physical	ly Handicapped _	Speech Correction	on Other

OTHER PROFESSIONAL AREAS_

"The Conecuh County School System does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups."



EDUCATIONAL AND PROFESSIONAL PREPARATION:

Begin with high school and list in chronological order.

Name of	School	Location	From Date	To Date	No. of Years	Degree Granted
TEACH	IING EX	KPERIENCE				
From (date)	To (date)	Name and Location of School - City and State	Name an School B	d Address of Soard	Grade (Subject T	
				Total `	Years Teachin	ng Experience
Are you u	nder contr	act? If yes, give da	te of expirati	on		_
What was	your last s	salary?				
Have you	previously	been employed by the Conecu	ıh County Pu	blic Schools?		
When is the	he earliest	you could begin work here?		_	yes no	
Are you a	citizen of	the United States?				

$\textbf{EXPERIENCE OTHER THAN TEACHING} \ \ \textbf{(including military service):}$

From (date)	To (date)	Name of Firm or Employer	Address	Kind of Work	No. of Months
		sked to resign, been discharged, or faile sNo If yes, give details			
Have you	ı ever been c	onvicted of an offense other than a miso	demeanor?	yesno	
If yes, ex	plain				
List co-c	curricular act	ivities which you are qualified and prep	pared to direct		
L ist colle	ege activities	and honors before and since graduation			
List conc	ge activities	and nonors before and since graduation			
Addition	al informatio	n which you wish to submit			
					

REFERENCES:

NAME	OFFICIAL POSITION	ADDRESS	PHONE NO.
	all information given on this application of information on this application cons		
Date		Signature (if emailing, ty	ype name.)