

PICKENS COUNTY SCHOOLS

Aliceville~Carrollton~Gordo~Reform



INSPIRING ETHICAL LEADERS...ONE CHILD AT A TIME

377 Ladow Center Circle~~Carrollton, Alabama 35447~~Telephone: (205) 367-2080~~Fax: (205) 367-8404 Website: www.pickenscountyschools.net

Application for Professional Employment

Date of Application:

(Applications will be held for a period of one year from today's date.) **Personal Data** Name:____ Social Security Number: Middle Last First Address: (If address is temporary, until what date?) Permanent Address:_____ Telephone: Date of Birth: _____ Age: _____ Race: _____ Sex: ____ Marital Status (optional) Is there any reason that will prevent you from accepting any school assignment? Is there any reason that will prevent you from attending scheduled meetings or other school activities held before or after school hours? If you answered "YES" to either of the above questions, please explain: Please attach a copy of your Alabama Do you hold a valid Alabama teaching certificate?_____ Teacher's Certificate and your complete College transcript(s). Class or Rank: _____ Type: _____ Areas of Endorsement: ___ Have you applied for Alabama certification? ______ Date of application: _____ Indicate your choice of elementary grade or secondary subjects which you are certified to teach and rank in order of preference. 2nd choice:_____ 3rd choice Other special training or skills (language, extracurricular activities, etc.)

Education and Professional Preparation

Type of School	Name and Address	Dates Attended	Degree (Specify)	Major/Minor
High School				
College or University				
Graduate				
Post Graduate				

Perspective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, disability, veteran affiliation.

Work Experience

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Applicant's Signature_