APPLICATION FOR TEACHING POSITION

AVOYELLES PARISH SCHOOL BOARD



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

	Date of Ap	plication:		
Carlot A Champa	Social Secu	rity Number:		
	Teacher Ce	rtificate: Type	No	
		Areas Certified:		
Name: (Last)	(First)	Mi)	(Maiden)	
Present Address:				
Permanent Address:				
Telephone:				
E-Mail:				
Birthplace:				
	Profession	nal Training		
Name of High School:		Year of	Graduation: _	
Colleges and Universities	Major	Minor	Degree	Year of Graduation
Note: Attach copy of teaching cert	ficate or official transcrip	t showing the awarding o	f a Bachelor's I	Degree.
NTE Scores: GK: CS	: PK	: AREA		
or PRAXIS Exams: (Must have Prand GPA 2.20 or above for employ or Core Academic Skills: YesAREA:	raxis I completed or ACT rement.) Completed Praxis No No (If yes, attach	Score of 22 or more or a S I Pre-Professional Skills T a copy.) Completed Prax	SAT verbal and Tests (PPST): Ye	d math score of 1030 es No
Do you know of any reason(s) w Yes No Please Explain:				applying for?
2. Have you ever been arrested? You		2. \		
3. Have you ever been convicted of 4. If so, have you been pardoned?				
1. If 50, have you been paraoned:	INU	TYOU APPLICABLE		

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:				

BLAINE M. DAUZAT, 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 Out of Sta	ťe certificate
	Copy of professional license (Social Worker, Spee Nurse/Physical Therapist/or Psychologist)	ch/Language Pathologist/School
	Military Credit: Attach copy of DD-214 Form (A teaching experience will be given for military serv	maximum of 3-years ice.)
Need to apply for TAT, Reinstate a Type (A, B	PL2 , PL3, Ancillary certificate or Out of State Certific , C) Certificate, Add a degree or Area of certification <u>th</u>	ate; Update a Level (1, 2, 3) Certificate or e following will be needed:
	Official transcript (s)	
	Praxis and/or ACT or SAT score report (An ACT co SAT combined verbal/critical reading and math sc used in lieu of Praxis 1 PPST Exams or Core Acade in reading, writing and math by prospective teach	ore of 1030 may be mic Skills for Educators
	Letter from university verifying admission to a tea (PL applicants - Practitioner License)	cher education program
	Processing Fee: Payable to <u>LA Department of Ed</u> (Renewing a certificate, adding a degree or other	
At time of hire, the follo	wing must be done:	
Finge	erprinting and Drug Testing (See the Receptionist)	
Comp	olete a Payroll Packet (Finance and Insurance Dep	artment)
Verific	cation of Previous Experience (Personnel-Curriculu	m and Instruction)

PLEASE TYPE OR PRINT IN INK

PROFESSIONAL CONDUCT FORM (All questions <u>must</u> be answered)

NAME OF APPLICANT: (Include First, Middle, Maiden, and Married)	Social Se	Social Security Number:	
ADDRESS:	DATE OF	DATE OF BIRTH:	
Each Question must be answered:		Please YES	Check NO
 Have you ever had any professional license/certificate denied, suspende or voluntarily surrendered? If YES, in which state? 	ed, revoked,	123	NO
 Are you currently being reviewed or investigated for purposes of such actated in #1 or is such action pending? If YES, in which state? 	etion as		
3. Have you ever been convicted of any felony offense, been found guilty o plea of nolo contendere (no contest), even if adjudication was withheld? If yes, please provide the following information:	r entered a		
Date of Conviction: Court Jurisdiction of Conviction:			
 4. Have you ever been convicted of a misdemeanor offense that involves a following: a. Sexual or physical abuse of a minor child or other illegal conduct w child. b. The possession, use, or distribution of any illegal drug as defined by or federal law. 	vith a minor		
5. Have you ever been granted a pardon or expungement* for any offense a	as stated in		
NOTICEEXPUNGEMENTS, FIRST OFFENDER PARDONS, Background Checks (CBCs) conducted for purposes of employme La. R.S. 17:15 and La. R.S. 15:587.1. Pursuant to Louisiana law Reclose ALL ARRESTS, COURT ACTION and CONVICTIONS, (Including beforder pardons and pre-trial diversion), and a copy of the report expartment of Education (LDE), in addition to the potential employer or Lear BESE policy set forth in Bulletin 746, Louisiana Standards for State Certifications to disclose actions such as first effective.	ent will be conducted. S. 15:587.1., but not limited shall be prov. A Education A	ucted in a packgrou to expur ided to agency (I	accordance nd checks s ngements, f the Louisi LEAs)s.
ilure to disclose actions such as first offender pardons, pre-trial diversion, expun nial and/or revocation."	ngements, etc. is	grounds	for certifica
ou answered "YES" to any questions, #1 through #5, you must provide count of proceedings, civil records of Federal, State and/or District School Board a track the provide full disclosure of the nature and circumstances of EACH separate in	actions, or other incident in your	r relevan applicati	t documents on packet.
ffirm and declare that all information given by me in the responses to i rrect, and complete to the best of my knowledge. I understand that a hission or addition, may result in criminal prosecution and/or the de tificate. I agree that my electronic signature as entered below in	ny misreprese	entation	of facts, by
tificate. I agree that my electronic signature as entered below is the nature on this document.	e iegai equiva	ilent of	my manua