

**PROFESSIONAL PERSONNEL
APPLICATION for EMPLOYMENT
Bledsoe County Board of Education
P.O. Box 369, 478 Spring Street
Pikeville, TN 37367-0369**

The Board of Education considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, martial or veteran status, or any legally protected status.

(Please Print)

Position Applied For:		Date of Application:	
Last Name:	First Name:	Middle Name:	
Address:	City:	State:	Zip:
Home Phone:	Cell Phone:	Email:	
Social Security: XX			

Have you ever been employed with the Board before? _____ Yes _____ No
If yes, give date: _____

Do you have a family member working for the Board? _____ Yes _____ No
If yes, state name, relationship, and location _____

If employed, may we contact your present employer? _____ Yes _____ No

Can you travel if required? _____ Yes _____ No

Describe any specialized training, apprenticeship, skills and extra-curricular activities.
Describe any job related training received in the United States Military.
List professional, trade, business or civic activities and offices held. You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Teaching Experience

(List in order beginning with most recent)

School	Address	Principal	Grade/Subject	School Year(s)	Total Months

Position Desired: _____ Grade Level: _____

Are you prepared to-
 Elementary:
 (a) Teach the students in your room – Art _____ Music _____ Physical Ed. _____
 Secondary:
 (b) Sponsor any activities? Annual, Newspaper, Music, Drama, Cheerleader, Senior Class, Coach, Other.
 List any extra Curricular Activities you could sponsor:

Education:

School	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/Professional				

Teaching License Number _____ State _____ Endorsement Areas _____

Work Experience:

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	May We Contact ___ Yes ___ No
Supervisor		
Reason for Leaving		
Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	May We Contact ___ Yes ___ No
Supervisor		
Reason for Leaving		
Employer	Dates Employed From To	Work Performed
Address		
Telephone Number(s)	Hourly Rate/Salary Starting Final	May We Contact ___ Yes ___ No
Supervisor		
Reason for Leaving		

Personal/Professional References		Do not include family members or past supervisors.	
Name	Phone Number	Best time to call	Occupation
1.			
2.			
3.			

Applicant's Statement

1. I recognize that if I am employed, the Board of Education may assign or reassign me to a specific position as the need requires. Yes No
2. Have you ever been convicted of a misdemeanor or a felony in any state of the United States?
 Yes No
3. I (have) (have not) been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence or insubordination as the same are defined in Section 49-5-511 of the Tennessee code. If "have" is indicated, explain fully the details of each dismissal on a separate sheet of paper. The employer's non-renewal of a yearly contract need not be indicated unless the non-renewal was for caused listed above.
4. Have you ever been allowed to resign from his/her job in order to avoid investigation, charges, or termination? Yes No
5. If my most recent employer was another Tennessee public school system and if my termination was voluntary, I certify that my resignation was, or will be submitted in writing at least (30) days prior to the beginning date stated: or, if within thirty(30 days,) that the previous board has waived its rights to such notice. A copy of my letter of resignation or of the said board action is attached or will be provided.
6. I am a citizen of the United States, or have obtained the proper work credentials; I do not advocate the overthrow of the American form of government nor am I a member of a political party which advocates the overthrow of the American form of government.
7. I do not have any contagious or communicable disease which may endanger the health of schools children. I understand that a post offer medical examination is a requirement of employment. Any decision not to hire based on this examination must be job related and when no reasonable accommodation is available.
8. I understand that misrepresentation of any of the above statements or information given during interview(s) or an unsatisfactory criminal background (conducted per TCA 49-6-413) may subject me to loss of opportunity for employment and loss of position if employed. Also, that acceptance of an offer of employment does not create a contractual obligation upon the Board of Education to continue employment in the future.

Date

Signature of applicant