## Polk County Board of Education 131 Stephens Street PO Box 665 Benton, Tennessee 37307 (423) 299-0471

Date\_\_\_\_\_\_ 20\_\_\_\_

Name of Applicant		Socia	al Security Numb	er
Position Applied For:				
All Endorsement Area	s and Codes			
INFOR	RMATION FOR P	ROSPECTIVE PROFE	SSIONAL EMPLOY	/EES
The mission of the Polk C level, or social status, an e the challenges of the mo communicate effective understand his role as a world in	ducation which dern society; to ely; to make sou n effective citize	enables him to enjo develop and maint ind moral judgment	by learning as a li ain good physica s; to think critica to positively to tl	felong process and meen I and mental health; to Ily and creatively, to the community and the
		part of the education	n profession.	
	Willing to grow with appropria workshops, an	ite professional org	anizations, atten when desirable, a	literature, affiliating ding conferences, nd engaging in any
D.	Willing to abid	•	gulations of the	Tennessee Board of d of Education.
	Pers	onal Informa	tion	
Name	(Last)	(First)	(Middle/Maid	en)
Present Address				
	(Street)	(City)	(State)	(Zip)
Until	Telep			
(Date Required for Tempora	ary Address)	(Area Code)	•	
Permanent Address	(Street)	(City)	(State)	(Zip)

## Work Experience in Education

List in chronological order (most recent first) your entire work history in educational settings

Name of School	City, State	Grades/Subjects/Other	Dates Star	ted-Left
ŧ				
	Ref	erences		
ersons listed as refere	<del>-</del> -	to answer questions concer	ning vour quali	fications
		pervisors under whom you h		
clude neighbors, frien	ds, or relatives. Please fi	Il out reference section com	pletely.	
(Name)	(Title)	Telephone:	(School)	(Home
· · · · · · · · · · · · · · · · · · ·	<b>(</b> )	Тапариона	(5050.)	1
(Street)	(City)	(State)	/7in\	·
(Street)	(City)	(State)	(Zip)	
(Name)	(Title)	Telephone:	(School)	(Home
				-
(Street)	(City)	(State)	(Zip)	
(2.1.214)	(5.1,)	(State)	(~4)	
(Name)	(Title)	Telephone:	(School)	(Home
·.				
(Street)	(City)	(State)	(Zip)	
(Name)	(Title)	Telephone:	(School)	(Home
(Street)	(City)	(State)	(Zip)	
	you sponsor? (Circle a	<del>-</del>		
inual, Newspaper, D	rama, Cheerleaders, C	lass Sponsor, Service Club	, Coach Etc.	
ecify		Other		
	ne of club/activity/sport)			

Do you hold a Tennesse	ee Teacher's Licen	se?Yes	_NoPending	
From another state?	YesNo	•		
Certification Number	-	Туре		
Expiration Date of Certi	ification			
College/University	City/State	Education  Degree/Major	Dates Attended	Overall GPA
				Overall GFA
			-	
Qtr. Or Sem. Hours in	: Art	· Health Mu		
Computers	Special Edu	cation Readi	ng Science	Math
Other				
		(Subject/Hours	)	
	Si	tudent Teachii	ng	
If student teaching com	pleted within the	last three years, sup	pply the following info	ormation:
School(s)				
Address (es)				
Grade(s)/Subject(s)		Dates: From _	То	
Supervising Teacher(s)				
Home or School Addres	s (es)			
College Supervisor				
College/ University Add	ress			

The school system does not discriminate on the basis of age, sex, race, color, creed, religions, national origin, or disability in the operation of its educational programs and activities, including employment practices.

## **Applicant Signature Statement**

Read this statement and sign after completing the application.

(Applicant must underline the appropriate response in Paragraphs 2, 3, 4, and 6)

I recognize that, if I am employed, the Polk County Board of Education will assign me to a specific position as the need requires.

I hereby certify that I (have/have not) been convicted of a misdemeanor or felony in any state of the United States. (If "have" is indicated, explain fully the details of each such conviction on a separate sheet.)

I hereby certify that 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 49-5-501 of the Tennessee Code. (If "have" is indicated explain fully the details of each such dismissal on a separate sheet.)

I (do/do not) object to having the local police authorities check into my background.

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 thirty (30) days prior to the beginning date stated; or, if within thirty (30) days, that the previous board has waived its right to such notice. A copy of my letter of resignation or of the said board action is attached or will be provided.

I (am/am not) a citizen of the United States. If not what is your status?

I (do/do not) have any contagious or communicable disease in such form as might endanger the health of children.

I shall support the constitution of Tennessee and the United States.

I understand that misrepresentation of any of the above statements may subject me to a fine, loss of opportunity for employment, and loss of position if employed.

I understand if I am not fully certified by State of Tennessee, I will not be considered for full employment as a teacher in the Polk County System.

I (agree/do not agree) to the release of all investigative records to the board for examination for the purpose of verifying the accuracy of criminal violation information as required by 49-5-406(a)(1)(A) and supply a fingerprint sample and submit to a criminal history records check to be conducted by the Tennessee Bureau of Investigation at my personal expense (49-5-413).

	Signature		
Ty	ped or Print	ed Name	