



NORTON CITY SCHOOLS APPLICATION FOR EMPLOYMENT ADMINISTRATIVE POSITION

P.O. Box 498
Norton, VA 24273

Ph. 276/679-2330
276/679-4586
Fax 276/679-4315

Personnel Use Only

- | | |
|-------------------------------------------|---------------------------------|
| <input type="checkbox"/> Student Teaching | <input type="checkbox"/> Praxis |
| <input type="checkbox"/> Placement | <input type="checkbox"/> Core |
| <input type="checkbox"/> References | <input type="checkbox"/> Spec. |
| <input type="checkbox"/> Transcripts | <input type="checkbox"/> Cert. |

Applicant's full Name _____
(Last) (First) (M.I.) (Maiden Name)

Other Name(s) _____
(Please provide any additional information relative to change of name, use of an assumed name, or nickname necessary to enable a check on your work or school record.)

Present Mailing Address _____
(Street) (City) (State) (Zip)

Permanent Mailing Address _____
(Street) (City) (State) (Zip)

Telephone Numbers:
Present _____ Permanent _____ Work _____

Social Security Number _____ (Note: Completion of number is optional. Failure to submit social security number on this form will not prohibit employment consideration. Social Security number may be required on other forms prior to employment.)

My signature below authorizes the school division to conduct a background investigation and authorizes release of information in connection with my application for employment This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other sources deemed appropriate in the sole discretion of the school division. I waive my right of access to any such information, and within limitation, hereby release the school division and the reference source from any liability in connection with its release or use. This release includes the sources cited above and illustrative examples as follows: the local Sheriff; information from the Central Criminal Records Exchange of either data on any criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Service Child Protective Services Unit and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I unconditionally certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I acknowledge that these questions shall be continuing in nature, and I have duty to update, change or further amplify my answers to guarantee accuracy at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted for employment I hereby agree to abide by the policies, regulations, and directives of the School Division.

Date _____ Signature of Applicant _____

Mark the Appropriate Boxes:

- New Application
- Previous Application of File
- Former Employee of the School Division

Are you a U.S. citizen?
 Yes No

If not, are you eligible to work in the U.S.?
 Yes No

Indicate Position(s) Desired for Which You are Endorsed:

- Teacher Administrator
- Guidance Supervisor
- Library/Media Psychologist
- Other (Explain) Visiting Teacher/Social Worker

_____ List Grade Level(s) and/or Subject Area(s) in Order of Preference:

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I. Educational and Professional Training (List chronologically.)

Level of Education	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation	Dates of Attendance From ... To
High School						
College or University						

II. Student Teaching Experience (List chronologically and include internships.)

Name of School	School Division City/County	State	Grade Level and/or Subject	Dates	Personnel Use

III. Teaching Experience (List chronologically all teaching experience. DO NOT INCLUDE SUBSTITUTE TEACHING.)

Name of School	School Division City/County	State	Position Held Grade Level and/or Subject	Dates Mo./Day/Yr. (From... To)	Total Years	Full Time (X)	Part Time (X)	Personnel Use
					Total			

IV. Administrative Experience (List chronologically.)

Employer	City/County	State	Administrative Experience	Dates of Employment	Personnel Use

V. Military Experience

Branch of Service	Occupational Specialty (MOS)	Inclusive Dates	Type or Discharge

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VI. Certification

A. If you have been issued a Virginia certificate, please submit a photocopy..... Copy enclosed? Yes No

Type of VA Certificate: Provisional Collegiate Professional Postgraduate Professional Pupil Personnel Tech.

Year of Expiration of Virginia Certificate _____ Endorsement(s) _____

Have you applied for a Virginia Certificate? Yes No When? _____ Check if statement of eligibility enclosed

B. If you have been issued a certificate in another state, please submit a photocopy. Copy enclosed? Yes No

State _____ Expiration Date _____ Certification/Endorsements _____

State _____ Expiration Date _____ Certification/Endorsements _____

C. Have you taken the PRAXIS SERIES? Yes No (If yes, please submit a copy of your scores – indicate paper or computer test version.)

Core Battery? Yes No _____ Copy enclosed? Yes No
 Month Year Math Reading Writing

Subject Area: Yes No _____
 Month Year Subject Score

VI. GENERAL INFORMATION

Month, Day and Year Available for employment _____ Are you under contract? Yes No

If yes, where? _____ Present position _____

If presently employed, why do you wish to change? _____

If under contract, what type: Annual Probationary Continuing/Tenure Other (explain) _____

If under contract have you checked and can you be released if you are offered another position? Yes No

If not under contract now, have you ever held a continuing contract in Virginia Yes No

If yes, cite school division(s) and date(s) _____

Referral source: Advertisement/Posting Employee Friend Other (explain) _____

Have you ever been refused tenure or a continuing contract? (If yes, explain on back.)..... Yes No

Have you ever been discharged, advised or requested to resign from a position? (If yes, explain on back.)..... Yes No

Have you ever been convicted of a violation of law other than a minor traffic violation? (If yes, explain on back.)..... Yes No

Have you ever had a certificate or license revoked or suspended? (If yes, explain on back.)..... Yes No

Are any criminal or non-civil charges or proceedings pending against you? (If yes, explain on back.)..... Yes No

Have you been convicted (as guilty or not innocent, or a determination of abuse or neglect founded against you) of any offense involving moral turpitude, the sexual molestation, physical or sexual abuse or rape of a child, or any like offense against an adult?

(If yes, explain on back.)..... Yes No

VIII. References

It is the applicant's responsibility to have the following information provided the School Division in order to be considered for employment: (Please note that references may be contacted upon receipt of the application whether or not an opening exists.)

A. Three references are required as a minimum and must include current employer if employed, or last employer if not currently employed.

B. Unless included in Placement File, applicants with work experience must provide recommendations from principals and/or superintendents from all contracted educational work experiences within the past three years. If experience was not within the past three years, provide references from last contracted experience. Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement file or by listing names below.

C. As indicated above, a Placement File is being sent, and/or references are listed below:

Name of Reference	Position/Relationship	Mailing Address	Phone

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IX. Extracurricular Activities

Indicate the number of years experience in the activities listed below. Circle activities you are willing to coach/sponsor:

Extra Curricular Activity	High School Experience	College Experience	Contract Experience
Football			
Basketball			
Baseball			
Softball			
Track			
Cross Country			
Wrestling			
Gymnastics			
Field Hockey			
Golf			
Tennis			
Volleyball			
Soccer			

Extra Curricular Activity	High School Experience	College Experience	Contract Experience
IM Director			
Athletic Director			
Athletic Trainer			
Forensics			
Debate			
Drama			
Yearbook			
Newspaper			
Literary Magazine			
Student Government			
Cheerleaders			
Honor Society			
Clubs			

X. Other Information

Are you able to perform the duties of the job for which you are applying? Yes No

Estimate your total absence from work or school for the last three years and explain the reason(s):

Explain any physical or mental conditions which would adversely affect your ability to perform the duties of the position you seek; or if there are none, so state:

In your own handwriting, provide any additional information you desire that will afford an additional understanding of your qualifications. Your goals, objectives, philosophy, and other background factors are of special interest.

Additional Remarks and/or Explanations From Section VII – General Information

The School Board does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, handicapping conditions, or sex in its educational programs or employment. No person shall be denied employment solely because of any impairment, which is unrelated to the ability to engage in activities involved in the position or program for which application has been made.

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