

Return to: Director of Personnel  
Carter County Schools  
305 Academy Street  
Elizabethton TN 37643



## PROFESSIONAL APPLICATION FOR EMPLOYMENT IN THE CARTER COUNTY SCHOOL SYSTEM

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Position \_\_\_\_\_

Indicate in order of preference grade K-3, 4-5, 6-8, 9-12 administration or special area. If applying for grades 6-12, or special areas, indicate subjects for which you have Tennessee Certification in order of preference.

Date \_\_\_\_\_, 20\_\_\_\_ Social Security No. \_\_\_\_\_

<b>Type of Tennessee Teaching Certificate held</b> _____	<b>Certificate Number</b> _____	<b>Certificate Subjects/Grades</b> _____
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Underscore any of the following which you are able to coach or direct successfully: school plays, orchestra, football, basketball, baseball, golf, wrestling, track, soccer, tennis, year book, school paper, glee club, art, boxing, dramatics, band, debate, others (name) \_\_\_\_\_

You may add by letter or resume any additional information which will give us a more complete estimate of your qualifications. Testimonials may be included.

This application will be placed on file for one year for consideration when vacancies arise. It must be renewed by letter and kept up-to-date if it is to remain in our active file. It should be complete and accurate in every detail.

I certify that all of the statements made in this application are true, complete and correct, to the best of my knowledge and belief and are made in good faith.

I understand that false information may be grounds for rejection of my application.

Additionally, I understand that my employment is contingent upon clean background checks from TBI, CPS, and the Health Department.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## EDUCATION

Name and Location of Institution	Major	Year Degree Received	Degree Received	Years Attended

\*Enclose or provide a certified copy of all transcripts

## PRAXIS/NTE SCORES

Tennessee requires passing scores on NTE/PRAXIS Examinations to qualify for a teaching license. Even individuals with a Tennessee license based on reciprocity with another state are required to meet Tennessee's NTE/PRAXIS II requirements. Please complete the section below and **enclose a copy of your report(s)** for those you have taken.

<u>Principals of Learning and Teaching</u> <u>NTE Specialty Area(s) or Praxis II</u> <u>Examination</u>	Yes _____	No _____	If yes, enclose copy of score report.
_____	Yes _____	No _____	No _____
_____	Copy Enclosed	Yes _____	No _____
_____	Copy Enclosed	Yes _____	No _____
_____	Copy Enclosed	Yes _____	No _____

## STUDENT TEACHING

If you completed student teaching within the last three years or are now student teaching, please supply the following information:

**SCHOOL:** \_\_\_\_\_ **GRADE SUBJECT:** \_\_\_\_\_ **DATES:** From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone# \_\_\_\_\_

**SUPERVISING TEACHER:** \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Phone# \_\_\_\_\_

**COLLEGE SUPERVISOR:** \_\_\_\_\_  
 College/University Address: \_\_\_\_\_ Phone# \_\_\_\_\_  
 Home Address: \_\_\_\_\_ Phone# \_\_\_\_\_

## TEACHING/SUPERVISION/ADMINISTRATIVE EXPERIENCE

List in chronological sequence regular teaching experience in public and private schools and in colleges and universities. Please indicate part-time or full-time experience.

Name of School	Phone Number	Grade/Subject Area(s) of Responsibility	FT PT	Dates (From-To)	Supervisor's Name and Phone Number

# WORK EXPERIENCE OTHER THAN TEACHING

List Chronological

Employer	Complete Mailing Address	Type of Work	Dates of Employment	Supervisor's Name and Phone Number

List any language(s) you speak other than English: \_\_\_\_\_

List any other areas of knowledge, such as sign language and computer technology, in which you are proficient: \_\_\_\_\_

## REFERENCES

List the names of four (4) persons who supervised your work professionally or know your qualifications for teaching. New teachers must list the teacher(s) with whom student teaching was done as well as the college/university supervisor(s) of student teaching. Experienced teacher must list current and past principal(s). Please obtain three (3) confidential references from among the supervisors or professors you list below and return them with your application.


May we contact your present employer?

Yes: \_\_\_\_\_

No: \_\_\_\_\_

May we share your name/application with other school employers as they request referrals?

Yes: \_\_\_\_\_

No: \_\_\_\_\_

Please read and sign the following certificate as required by TCA 49-1318:

I recognize that if I am employed, the board of education of the said school system will assign or reassign me to a specific position as the need requires.

I hereby certify that I have not been convicted of a misdemeanor or a felony in any state of the United States.

I further certify that I 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 49-1401 of the Tennessee Code.

If my most recent employer were another Tennessee public school system and if my termination were voluntary, I certify that my resignation was, or will be submitted at least 30 days prior to the beginning date stated hereon: or, if within 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 understand that misrepresentation of any of these certifications may subject me to the penalties prescribed in Sections 49-1317 or 49-1318 of the Tennessee Code.

(If you cannot sign below, please give full explanation on separate sheet)

Signed \_\_\_\_\_ Date \_\_\_\_\_

The Carter County Board of Education is an equal opportunity employer. No discrimination is made on the basis of sex, marital status, race, creed, color, or religion, handicap, or disabilities. If you believe you have been discriminated against, you have a right to file a complaint with the Title VI Coordinator: Terry Hubbard, 547-4011.

The accuracy of information submitted on this application will be verified by fingerprint and criminal history records check conducted by the Tennessee Bureau of Investigation pursuant to Tenn. Code Ann. 49-5-413. You are not required to disclose a parking or moving violation if it does not include a period of confinement. You will be required to pay the cost incurred in conducting this background check.

**Knowingly falsifying information required by Sec. 49-5-406 (a) (1) shall be sufficient grounds for termination of employment and shall also constitute a Class A misdemeanor which must be reported to the District Attorney General for prosecution.**

Legal references: Tenn. Code Ann. 49-5-406  
Tenn. Code Ann. 49-5-413

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