

DECATUR COUNTY BOARD OF EDUCATION

P.O. Box 369, 59 West Main Street

Decaturville, TN 38329

(731) 852-2931

CERTIFIED APPLICATION FOR EMPLOYMENT

DATE OF APPLICATION: _____

PERSONAL INFORMATION

Name: _____

Last First Middle

Address: _____

Street (Apt) City State Zip

Contact Info: _____

Home Phone Cell Phone Email

Date of Birth: _____ Social Security Number _____ Available Start Date: _____

Are you currently employed? ___YES ___NO If YES, may current employer be contacted for verification? ___YES ___NO

If NO, please state reason: _____

POSITION DESIRED: _____

LIST GRADE and SUBJECT AREA PREFERENCES: _____

LIST SPORTS/CLUB ACTIVITIES YOU WOULD BE WILLING TO COACH/SPONSOR: _____

TENNESSEE CERTIFICATION INFORMATION

Do you have a Tennessee Teaching License? ___YES ___NO ___Copy Attached

If YES: _____

License Number Endorsements Practitioner or Professional

If NO: Application has been made ___YES ___NO Verification Letter from University Attached ___YES ___NO

EDUCATION (Copy of Transcripts should be attached to application)

	Name of Institution	Location	Dates Attended	Degree	Major/Minor	Date Conferred
High School						
University-Bachelors						
University-Masters						
University-Masters+						

EMPLOYMENT (List all Professional Teaching Experience beginning with current employment.)

Grade	Position Subject	Dates		Total Years	Supervisor's Name	Telephone #	School Name/State
		From	To				

STUDENT TEACHING/INTERNSHIP EXPERIENCE

Name of School and System	Dates		Grade(s)	Subject	# of Weeks	Supervising Teacher
	From	To				

OTHER WORK EXPERIENCE (Private School, College, Private Company/Industry)

Name of Organization (If a private school, indicate grade/subject taught)	Dates		Location	Type of Work	Phone #	Supervisor Name
	From	To				

REFERENCES

Name and Title	Street Address	City, State, Zip Code	Phone #

I 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 defined in TN Code Annotated Sections 49-2-203, 49-5-501, and 49-5-511.

By filing application for employment with the Decatur County Board of Education, I understand that any misrepresentation of information on the application is cause for termination. If employed, I agree to abide by all policies governing Decatur County Board of Education.

All applicants will be required to complete a background check through the TN Bureau of Investigation prior to employment.

Signature of Applicant _____ **Date** _____