

# Norfolk Public Schools

Department of Human Resources 800 East City Hall Avenue Norfolk, Virginia 23510 Human Resources Use Only9Stu. Tchg.PRAXIS199Place. FileSpec99ReferencesLIC.99TranscriptsFileSpec

## **Employment Application**

Please Print or Type				
Applicant's Full Name:				
Last	First	Middle		Maiden
Other Name(s):				
(Please provide any additional information relative to chor school record.)	ange of name, use of an assumed name, or	nickname, neces	sary to enable a	check on your work
Present Mailing Address:				
Street	City		State	Zip
Permanent Mailing Address:				
Street	City		State	Zip
Telephone Numbers: Present ()   Work ()	Permanent (	)		

#### 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, medical records, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. Effective July 1, 1995, the background investigation will include fingerprinting (Section 22.1-296.2 of the code of Virginia). I waive my right of access to any such information, and without 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 specific examples as follows: the local Sheriff, information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or any other State Department of Social Services 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 certify that I have made true, correct and complete answers and statements in this application with the knowledge that they may be relied upon in considering my application. Further, I understand that an omission and/or false statement made by me on this application, or on any accompanying supplement will be sufficient grounds for my not being hired or for my being dismissed should I be employed by the school division.

Date: Signature of A	Applicant:
Mark the Appropriate boxes: New Application Previous application on file Former employee of the school system	Indicate Position(s) desired for which you are endorsed:TeacherPsychologistGuidanceVisiting teacher/Social WorkerLibrary/MediaAdministratorOther (explain)Substitute Teacher (Complete Sections I, IV, V, VII, VIII)
Are you a U.S. Citizen? Yes No If not, are you eligible to work in the U.S.? Yes No	List grade level(s) and/or subject area(s) in order of preference

I.	<b>Educational and Professional Trainin</b>	<b>1g</b> (List chronologically)
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			(List emonorogically)			
Level of Education	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation	Dates of Attendance
High School						
College or University						

### II. Student Teaching Experience (List all chronologically and include any internships.) Student Teaching Grade

Name of School	School Division City/County	State	Grade Level and or Subject	Dates	Human Resources Use
	City/County				Resources ose

# III. Teaching Experience (List choronologically all teaching experience, and include a sheet if necessay. DO NOT include substitute teaching.)

	<b>Teaching Experience</b> (Enstenoronologically an teaching experience, and mended a sheet in necessary. Do NoT mended substitute teaching.)									
Name of School	School Division	State	Position Held Grade	Dates	Total	Full or Part	Human			
	City/County		and/or Subject Taught	Mo./Day/Yr.	Years	Time	Resources Use			
			(Specify)	(FromTo)						

### **IV. Work Experience** Other Than Teaching (List Chronologically and attach a sheet if necessary.)

Employer	City/County	State	Kind of work	Dates of Employment	Human Resources Use

# V. Military Experience

Branch Of Service	Occupational Speciality (MOS)	Inclusive Dates	Type of Discharge

### VI. Licensure

A.	Have you been issued a Virginia tea Type of VA licenses held: P P	aching license? rovisional upil Personnel	□ C	o Yes D ollegiate Profe echnical Profes	essional 🗖	ose copy. Postgraduate Pro	ofessional
	Year of expiration of Virginia	License	E	ndorsement(s)	)		
	Have you applied for a Virginia	a License?	N	o Yes			
	Statement of eligibility receive	d?	N	o 🗌 Yes 🗌	If yes, enclo	se copy.	
	If you have applied, but have n	ot received you	r license, i	indicate whether	er you applie	ed through your Univer	sity or directly with
	Richmond.						
	Date you applied						
п	TT 1 · 1 1· ·	4 4 4 9	N		10 1	C 1	
В.	Have you been issued a license in a						
	State Expirati State Expirati	on Date		Endorsement	.s		
	State Expirati			Endorsement	.8		
С	Have you taken the Professional Te	acher Assessm	ent? (If ve	s enclose a cor	ny of your so	cores)	
<b>U</b> .	Praxis1: Yes No			s, enclose a cor	py or your s		
		Month-Year	– <u>Math</u>	Reading	Writing	PPST or CBT	
	Specialty Area: Yes No			8			
	1 <i>5</i> <u> </u>	Month-Year		Subject		Score	
V	I. General Information						
	Month, Day, and Year you are available	lable for empl	oyment		Arey	vou under contract?	Yes No
	If yes, where?	Preser	t Position		J		
	If yes, where? If presently employed, why do you	wish to chang	ge?				
	If under contract, what type:	nual 🔲 Probat	ionary	Other (explain	1)		Continuing/Tenure
	If you are under contract now,	have you check	ked and car	n you be releas	ed if you are	e offered another position	on? Yes 🗌 No 🗌
	If not under contract, have you ever	held a continu	ing contrac	t in Virginia?			Yes No
	If yes, site school division(s) and d	ate(s)					
	If yes, site school division(s) and d Referral Source: Advertisement	Posting	Employ	ee 🗌 Friend 🛛	Other (ex	.plain)	
	Have you ever been refused tenure	or a continuing	contract?				
	(If yes, explain on back.)						Yes No
	Have you ever been discharged or fe						
	(If yes, explain on back.)						. Yes No
	Have you ever been convicted of a						
	(If yes, explain on back.)						. Yes No
	Have you ever had a certificate or li						
	(If yes, explain on back.)						. Yes No
	Any criminal charges or proceedings	pending again	st you?				
	(If yes, explain on back.)						. Yes No
	Have you been convicted of any offer						
	or sexual abuse or rape of a child? (I	t ves. explain o	n back.)				Yes No

### VIII. References

It is the applicant's responsibility to have the following information provided to the School Division in order to be considered for employment: THIS APPLICATION WILL NOT BE PROCESSED IF PROFESSIONAL REFERENCES ARE NOT PROVIDED WITH COMPLETE ADDRESSES AND PHONE NUMBERS.

- A. The names of at least three professionals must be provided 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 three years, provide references from the last contracted experience.
- C. As indicated above, a placement file is being sent, and/or reference as listed below.

Name of Reference	Position/Relationship	Mailing Address	Phone Number

### IX. Extracurricular Activities

Indicate the number of years in the activities listed below. Check boxes of activities you are willing to coach or sponsor:

Extra	High School	College	Contract	Extra	High School	College	Contract
Curricular Activities	Experience	Experience	Experience	Curricular Activities	Experience	Experience	Experience
Football				IM Director			
Basketball				Athletic Director			
Baseball				Athletic Trainer			
Softball				Forensics			
Track				Debate			
Cross Country				Drama			
Wrestling				Yearbook			
Gymnastics				Newspaper			
Field Hockey				Literary Magazine			
Golf				Student Government			
Tennis				Honor Society			
Volleyball				Clubs			
Soccer				Cheerleaders			

#### X. Other Information

IN YOUR OWN HANDWRITING, state why you believe yourself to be suited for the teaching profession. (This is required)

(attach sheet if needed)

#### ADDITIONAL REMARKS AND/OR EXPLANATIONS FROM SECTION VII GENERAL INFORMATION

(attach sheet if needed)

The Norfolk Public School System does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, disability, or sex in its educational programs or employment.