



**CITY OF BAKER SCHOOL SYSTEM**

14750 Plank Road, Baker, LA 70714  
P.O. Box 680, Baker, Louisiana 70704-0680  
Phone (225) 774-5795, Fax (225) 774-5797

[www.bakerschools.org](http://www.bakerschools.org)

*Ulysses Joseph, Superintendent*

The City of Baker School System is seeking to hire applicants for the following positions:

**Teachers:** All applicants must submit a copy of your teaching certificate or copy of acceptance letter from an alternative teaching program along with your application. **Your application will not be accepted without this information.**

**Paraprofessionals:** All applicants must submit proof of 48 semester hours of college work or a copy of your Paraprofessional examination showing passing scores. **Your application will not be accepted without this information.**

**Substitute Teachers:** All applicants must have a four(4) year degree from an accredited college or university. Applicants must submit an unofficial copy of your transcript **OR** a copy of your diploma. **Your application will not be accepted without this information.**

**School Food Service/Bus Drivers/Maintenance/Custodian:** All applicants must submit a copy of your high school diploma. If you do not have proof of graduation you must be tested at the Baker Adult Learning Center at 2080 Main Street, Baker, LA 70714. Please call (225) 775-8159 for more information. Please bring passing score to the Office of Human Resources. **Your application will not be accepted without this information.**

Thank you for your interest in employment with the City of Baker School System.



## THE CITY OF BAKER SCHOOL SYSTEM (CoBSS)

**PHYSICAL ADDRESS: 14750 PLANK ROAD, BAKER, LOUISIANA 70714**

**MAILING ADDRESS: POST OFFICE BOX 680, BAKER, LOUISIANA 70704-0680**

**TELEPHONE NUMBER: (225) 778-2379 HUMAN RESOURCES FACSIMILE NUMBER: (225) 774-5798**

All applicants being considered for a position will be required to submit to a background check and to a drug and alcohol screening. (Adopted 5/21/2002)

### EMPLOYMENT APPLICATION (Blue Ink)

Date Application Completed (mm/dd/yyyy) \_\_\_\_\_ SSN: \_\_\_\_\_

#### GENERAL INFORMATION

Name:

LAST NAME

FIRST NAME

MIDDLE NAME

(MAIDEN, if applicable)

Cellular Phone #: ( ) - Home Phone #: ( ) -

Email Address:

Current Mailing Address:

Number and Street/Apartment Number

City

State

Zip Code

Home Address:

(If different from mailing address OR write "SAME") Number and Street/Apartment Number

City

State

Zip Code

1) Have you ever worked for the City of Baker School System? ☐ YES or ☐ NO

If so, when (m/y to m/y): \_\_\_\_\_ to \_\_\_\_\_

If so, what was/were the position(s): \_\_\_\_\_

2) Have you ever applied to teach/work for the CoBSS? ☐ YES or ☐ NO

3) Are you related to any of the current City of Baker School Board Members? ☐ YES or ☐ NO

If yes, list who (whom) and explain the relationship: \_\_\_\_\_

4) Are you able to perform the essential functions described within the job description? ☐ YES or ☐ NO

If yes, are you able to perform the essential functions: ☐ with accommodation or ☐ without accommodation

#### OPTIONAL DEMOGRAPHIC INFORMATION

The following information is collected to complete Equal Opportunity Reports required by law. You are not legally obligated to provide this information for the application process; however, it may be required for the employment process.

1) **Title:** ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Dr.

2) **Gender:** ☐ Male or ☐ Female

3) **Date of Birth (M/D/Y)** \_\_\_\_\_

4) **Race/Ethnicity:**

☐ Black

☐ American Indian/Alaskan Native

☐ White

☐ Asian/Pacific Islander

☐ Hispanic/Latino

☐ Other: (Please List) \_\_\_\_\_

## RETIREMENT INFORMATION

- 1) Are you currently enrolled in a Louisiana retirement system? ☐ Yes or ☐ No If so, which of the following three choices:  
☐ Teachers Retirement System of Louisiana (TRSL)  
☐ Louisiana School Employees Retirement System (LSERS)  
☐ Louisiana State Employees Retirement System (LASERS)
  
- 2) Have you ever retired from a Louisiana retirement system? ☐ Yes or ☐ No If so, which one:  
☐ TRSL    ☐ LSERS    ☐ LASERS  
 If so, when is the date (mm/dd/yyyy) of your retirement? \_\_\_\_\_
  
- 3) Have you ever retired from another retirement system? ☐ Yes or ☐ No  
 If so, which one: \_\_\_\_\_
  
- 4) Are you are Retiree Who Returned To Work (RTW)? ☐ Yes or ☐ No  
 If so, what is the date (mm/dd/yyyy) of your original Return To Work? \_\_\_\_\_
  
- 5) Are you eligible for an increment for completion of PIP in the 1980s? ☐ Yes or ☐ No  
 If so, what is the Frozen Yearly PIP amount? \$ \_\_\_\_\_

## CLASSROOM TEACHING POSITIONS

*(Please check one or more as desired, and indicate grade level(s) and/or subject area(s). Also, if appropriate, please indicate Special Education)*

<input type="checkbox"/> Baker Heights Elementary (PK-5 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Bakerfield Elementary(PK-5 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Park Ridge Magnet School (K-8 <sup>th</sup> )	
<input type="checkbox"/> Elementary (K-5 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Middle (6 <sup>th</sup> -8 <sup>th</sup> )	Grade Level(s): _____ Subject Areas: _____
<input type="checkbox"/> Baker Middle School (6 <sup>th</sup> -8 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Baker High School (9 <sup>th</sup> -12 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Baker Alternative Learning Center	Grade Level(s): _____ Subject Area(s): _____

---

## OTHER JOB CATEGORIES

*(Please check one or more job category(ies) and then list OR circle the position title(s) that you are applying for)*

☐ **Central Office Administrators:** Either **circle** the position(s) you are applying for **OR list** on the line below.  
(Superintendent, Director of Instruction (Elementary or Secondary), Supervisor of Special Education, Supervisor of Federal Programs, Supervisor of Human Resources, Supervisor of Child Welfare & Attendance, Supervisor of Information Management, Technology Services, and the Arts, Manager of School Food Service, Maintenance Manager, Transportation Manager, Business Manager, and Coordinator of Professional Development)

List the Position(s) You Are Applying For:

---

☐ **Central Office Support Staff** Either **circle** the position(s) you are applying for **OR list** on the line below.  
(Accounts Payable Specialist, Coordinator of Employee Benefits and Payroll, Finance Specialist, Payroll Clerk, Purchasing Clerk, Senior Accountant, Main Office and Federal Programs Receptionist, Administrative Assistant to the Superintendent, Administrative Assistant to Supervisor of Federal Programs, and Human Resources Analyst)

List the Position(s) You Are Applying For:

---

☐ **Other School Based Certified Positions** Either **circle** the position(s) you are applying for **OR list** on the line below.  
(Principal, Assistant Principal, Administrative Dean of Students, Professional School Counselor, Librarian, Interventionist Teacher, Behavior Modification Center Teacher, Master Teacher, and Mentor Teacher)

List the Position(s) You Are Applying For:

---

☐ **Pupil Appraisal** Either **circle** the position(s) you are applying for **OR list** on the line below.  
(Behavioral Interventionist Specialist, Educational Diagnostician, Individualized Education Program (IEP) Facilitator, Response to Intervention (RTI) Coordinator, School Nurse, School Psychologist, Social Worker, Special Education Records (SER) Specialist, and Speech Language Pathologist/Speech Therapist)

List the Position(s) You Are Applying For:

---

☐ **Support Staff** Either **circle** the position(s) you are applying for **OR list** on the line below.  
(Interventionist Paraprofessional, Special Education Paraprofessional, Computer Lab Paraprofessional, Behavior Modification Center Paraprofessional, Bus Driver, Bus Aide, Head Custodian, Custodian, Maintenance-at-Large, Lawn Care Groundskeeper and Maintenance Generalist, Food Service Technician, Food Service Manager, Executive School Secretary, Attendance Clerk, and Guidance Clerk)

List the Position(s) You Are Applying For: Either **circle** the position(s) you are applying for **OR list** on the line below.

☐ **Substitute Positions**  
(Teacher, Paraprofessional, Bus Driver, Food Service Technician, and Custodian)

List the Position(s) You Are Applying For:

---

## BUS DRIVER AND SUBSTITUTE BUS DRIVER APPLICANTS COMPLETE THIS SECTION

1) Do you hold a valid Commercial Driver's License? ☐ Yes or ☐ No

List the State: \_\_\_\_\_ List \_\_\_\_\_ the \_\_\_\_\_ Number: \_\_\_\_\_

2) Do you wear Eye Glasses/Contacts? ☐ Yes or ☐ No Hearing Devices? ☐ Yes or ☐ No

3) Would you be willing to take a complete physical exam? ☐ Yes or ☐ No

4) Have you taken a complete physical exam in the last three to six months? ☐ Yes or ☐ No

If "Yes," attach a copy

5) Have you ever been convicted of any of the following? (If yes, explain in a signed & dated typed response for each conviction?)

a) Felony ☐ Yes or ☐ No

b) DUI ☐ Yes or ☐ No

c) Abuse of Drugs ☐ Yes or ☐ No

d) Wreckless Driving ☐ Yes or ☐ No

6) Have you ever been involved in a serious traffic accident within the last five years? ☐ Yes or ☐ No

If "Yes," please respond in a signed and dated typed response for each serious accident.

## ACADEMIC RECORD

List all universities (include high school, if high school is your highest level of education attained) attended beginning with the most recent. Include all institutions from which academic credit was applied to your undergraduate or graduate degree(s). Including study abroad programs, summer coursework, evening classes, co-op programs, professional schools, etc. Use the prefix "F" to indicate fulltime or "P" to indicate part-time. Record your actual cumulative GPA on a 4.00 scale as calculated by each school's guidance counselor/university registrar. Please submit copies (unofficial) of **high school diploma/GED and/or college degrees**. **NOTE:** Copies (unofficial) of college transcripts **may** be submitted to help determine Highly Qualified status of teachers and paraprofessionals.

Institution/School and Location	Date of Attendance (M/Y to M/Y)	Degrees & Date Awarded OR Expected	Major or Field of Study (if applicable)	F/P	Overall GPA ??/4.00

Explain any instances of transfer, probation, dismissal, withdrawal from a course, and/or failing grade(s). Also, feel free to describe any extenuating circumstance(s) that may have affected your college grades.

---

---

---

## PROFESSIONAL/WORK/TEACHING EXPERIENCE

List all professional experience, all work experience, all military, full time department of education, all PK-12 public, PK-12 private/parochial, and/or full time university teaching experience in chronological order, beginning with your most recent employer. Use additional typed pages if necessary. Do not list part time or substitute teaching/work experience.

Dates (mm/yy to mm/yy)	Name of Employer	Address of Employer	Subject and/or Grade Levels Taught (certificated) or Work Experience with Comparable Job Duties of Position(s) Desired (support)	Number of Years
to				
to				
to				
to				
to				
to				
to				
to				

## LOUISIANA CERTIFICATION \*You may attach your certificate from [www.teachlouisiana.net](http://www.teachlouisiana.net) and write "See Attached" in boxes below

Certificate Type	Certificate Number	Valid Date (mm/dd/yyyy to mm/dd/yyyy) or Life	Year Received, Degree(s), and University on Teaching Certificate	Eligibility: For the following General Areas of Certification and/or Terms

## OTHER JOB CATEGORIES

Please list any other pertinent certifications and/or licensures required for the position(s) being sought:

## LIST OF AT LEAST THREE PROFESSIONAL REFERENCES THAT MAY BE CONTACTED

These will be the references contacted by the Hiring Manager; however, as soon as possible, please submit three letters of reference (teachers may submit three CoBSS Teacher Reference Forms. You should still turn in your application, resume, and cover letter and it is understood that your letters of reference may be submitted later for your application file or personnel file.

Name	Title or Position	Contact Email	Contact Phone Number	How You Are Acquainted

## NATIONAL TEACHER EXAMINATION (NTE) or PRAXIS SCORES

\*You may attach scores from [www.teachlouisiana.net](http://www.teachlouisiana.net) and write see attached in box below: \*

Please list all NTE and/or PRAXIS tests that have been met (passed) with the required cutoff score as set by the BESE and LDOE.

Test Code	Date Taken (m/d/y)	Test Name	Test Score	Required Score

## REQUIRED INFORMATION

The required information can be 1) hand-delivered to 14750 Plank Road, Baker, LA 70714, 2) mailed through the U.S. Postal Service at P.O. Box 680, Baker, LA 70704, 3) scanned and emailed to Mr. David Grisby, Supervisor of Human Resources at [dgrisby@bakerschools.org](mailto:dgrisby@bakerschools.org) with cc: to Mrs. Phyllis Gipson at [pgipson@bakerschools.org](mailto:pgipson@bakerschools.org), or 4) faxed to (225) 774-5798. Email or U.S. Postal confirmation should be generated within three-five working days of receipt of a **complete** packet.

- 1) **Letter of Intent (known as Cover Letter):** Please attach a typed Letter of Intent (Cover Letter) explaining why you want to teach/work in the CoBSS and your goals for success in the classroom/work setting. Possible structure (does not have to be structured in this manner): one inch margins on all four sides, 12' Times Roman font, full justification for an even right margin with signature in blue ink.
- 2) **Professional Resume':** Please attach a brief (one to three pages) typed resume' that follows the tenets of appropriate resume writing. Suggested elements of submitted resume: Demographic Information, Career Objective, Education (start with the highest level attained listed first; use months and years), Experience (start with the most recent job first; use months and year), Memberships and Affiliations, Awards/Honors/Distinctions, and Hobbies and Interests.
- 3) **Professional References:** If you are registered with a college/alternative certification program placement service, have your credentials forwarded to our office. If you are not registered, list at least **three** professional references below. New teachers should include names of college professors, cooperating teachers, and supervising teacher. Experienced teachers should include names of principals/supervisors under whom they have worked most recently. Other applicants must list names of supervisors who can attest to their previous or current work experience. **NOTE:** After submission of the a) CoBSS Application, b) Letter of Intent, and c) Resume, applicants should submit three recent reference letters or CoBSS Teacher Reference Forms (teachers only) as soon as possible for a complete file. (SSN is not required on the CoBSS Teacher Reference Form).
- 4) **Other Significant Documents (as applicable):** Certificated teaching applicants should attach copies (unofficial) of your most current and valid **teaching certificate**, PRAXIS scores (from PRAXIS or Teach Louisiana website), **college transcripts**. Applicants who have eligibility for a Practitioner's License (PL1, PL2, or PL3) should attach copies of their program **Admissions Letter, Plan of Study, and unofficial transcripts, and other pertinent documents** to demonstrate evidence of program participation. Paraprofessional applicants must present documentation to demonstrate that they are Highly Qualified in three ways: a) score of at least 450 on the PRAXIS Para Pro Assessment (**Para Pro Scoring Report**), b) at least an Associates degree or higher from an accredited university (**Degree Copy**), or 3) 48 hours of college credit with 3 hours of English composition, 6 hours of English or Reading, 6 hours of Math, with the remaining 33 hours in anything including up to 12 hours of remedial/developmental college classes (**Unofficial college transcripts with highlighted courses**). Academic Interventionist Paraprofessionals and Substitute Teachers must have an undergraduate college degree (**Degree Copy**). Applicants for other job categories, such as, but not limited to School Food Service Technicians and Bus Drivers, must provide required **documents (Licensure and Medical Documents)** as needed for the position. **NOTE:** Space does not allow for all of the requirements for all job categories to be listed.

## MISCONDUCT DISCLOSURE

Answering “**yes**” to any of these questions does not automatically disqualify you from consideration. Please answer each question.

- 1) Have you ever been convicted of a felony? ☐ Yes or ☐ No
- 2) Have you ever, at any college or university, been in other than good standing because of academic deficiencies, been censured for misconduct, or been the subject of disciplinary proceedings? ☐ Yes or ☐ No
- 3) Have you ever been subject to discipline by a professional organization? ☐ Yes or ☐ No
- 4) Have you ever been subject to termination? ☐ Yes or ☐ No
- 5) Have you ever resigned in lieu of being terminated, from a position? ☐ Yes or ☐ No

If the answer to any of the above questions is “**Yes**,” please explain fully in a typed statement that has been signed and dated in [blue ink](#).

### ATTESTATION

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal employment and other related matters as may be necessary in arriving at an employment decision. Further, I also authorize you to contact my previous employers to request my performance management evaluation results. I am aware that I the right to review the information received and to provide any response or information that I deem appropriate.

I am aware that the City of Baker School System (CoBSS) is required to provide, upon request, performance management evaluation results of persons that other school systems may wish to hire. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. Furthermore, it is understood that this application becomes the property of the CoBSS. The CoBSS reserves the right to reject an incomplete application. References and personal information, which become part of this record, are to be regarded as confidential and shall not be revealed to me.

**NOTE:** Your application will remain on file for the current school year and according to CoBSS policy; however, the application must be updated each school year if further consideration for a position is desired.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the City of Baker School Board, if employed.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_ Date: \_\_\_\_\_

***The City of Baker School Board is an Equal Opportunity Employer.***

***The CoBSS does not discriminate on the basis of race, color, national origin, gender, age, or qualified disability.***

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required Employment Eligibility Verification Document Form upon hire.