

Green Forest School District

400 E. 10th Street, P.O. Box 1950
Green Forest, Arkansas 72638
Phone: (870) 438-5201

Employment Application for Professional Personnel

Position for which you are applying

Your application for employment will not be considered unless all requested information is provided.

Name _____
Last First Middle Initial Maiden Name

Address _____
Street/Box City State Zip Code

Date of Application _____ Social Security No. _____

Other address where you may be reached _____

Work Phone No. _____ Home Phone No. _____

Name used on records if different from present name _____

Date available for work _____

Former Green Forest Employee: yes _____ no _____

If yes, give dates of employment _____

Do you have a relative who is a member of the Green Forest Board of Education? yes no

If yes, please give the name of relative and relationship: _____

Do you have other relatives employed by Green Forest? yes no

If YES, list name(s): _____



Schools Attended: List all applicable information:

Name of School and Location	Course of Study Major/Minor Fields	Diploma, Degree, or Certificate	Year Graduated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Credentials must be included with application:

- 3 All teaching and professional certificates (front and back, if appropriate)
- 3 All transcripts showing degrees

3 Other: _____

Type of certificate held now 3 None

3 Valid Arkansas 3

Valid other state _____

Certified teaching fields

Elementary areas of specialization

TEACHING EXPERIENCE

List teaching experience beginning with most recent years.

Name of School and Location	Type of Assignment	Dates Taught	Reason for Leaving
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total creditable years _____

(Full-time teaching in college, public school, or in an accredited private school is creditable.)

Please list below references who may be contacted regarding your work history.

REFERENCES

<u>Full name of Reference and Position/Title</u>	<u>School District or Firm Name</u>	<u>Mailing Address</u>	<u>Area Code/ Phone Number</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT EXPERIENCE

List each job held, starting with the present or last job. Include military service assignments. If you need additional space, please continue on a separate sheet of paper.

	Dates From To	Total Years Experience
Employer		
Address		Telephone() _____
Job Title/Work Performed		
Supervisor		
Reason for Leaving		
	Dates From To	Total Years Experience
Employer		
Address		Telephone() _____
Job Title/Work Performed		
Supervisor		
Reason for Leaving		
	Dates From To	Total Years Experience
Employer		
Address		Telephone() _____
Job Title/Work Performed		
Supervisor		
Reason for Leaving		
	Dates From To	Total Years Experience
Employer		
Address		Telephone() _____
Job Title/Work Performed		
Supervisor		
Reason for Leaving		

FOR TEACHING POSITIONS - Please describe the learning atmosphere you hope to promote for our students.

GENERAL INFORMATION

- All Arkansas school districts are authorized to obtain any criminal history information relating to an applicant for employment, by Act 1313 of 1997. Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to, theft, rape, murder, swindling, and indecency with a minor)?
- 3 yes 3 no

If yes, please state where, when, and the nature of the offense:: _____

(Conviction of a felony is not an automatic bar to employment. The district will consider the nature, date, and relationship between the offense and the position for which you are applying.)

REQUIREMENTS AND AGREEMENTS

DRUG-FREE SCHOOLS REQUIREMENTS

The District prohibits the unlawful distribution, possession, or use of illicit drugs and alcohol on school premises or as part of any of the District's activities.

Employees who violate this prohibition shall be subject to disciplinary sanctions. Such sanctions may include referral to drug and alcohol counseling or rehabilitation programs or employee assistance programs, termination from employment with the District, and referral to appropriate law enforcement officials for prosecution. Information on available rehabilitation or employee assistance programs and contacts shall be posted throughout the workplace.

Compliance with these requirements and prohibitions is mandatory and is a condition of employment. (This notice complies with notice requirements imposed by the federal Drug-Free Schools and Communities Act Amendments of 1989 [20 U.S.C. 3224a and 34 CFR 86.201]).

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize you to make inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.

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 that I am required to abide by all rules and regulations of the Green Forest School District.

In compliance with the Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap.

Signature of Applicant

Date