

# APPLICATION FOR INSTRUCTIONAL/STAFF OR ADMINISTRATIVE POSITION

## General Information

- Answer all questions completely in your handwriting in ink.
- Resumes are encouraged as a supplement to this application but are not accepted in lieu of this application.
- This application was designed for use with various types of job positions. Therefore, some questions may not be completely applicable to the position that you are seeking. However, please answer all questions.
- Please specify the position you are seeking.
- This application will be kept on file for a period of twelve months from the date it is received.

## How Can We Contact You?

\_\_\_\_\_  
Name (Last) (First) (Middle) Social Security Number (SSN)

\_\_\_\_\_  
Address (street) City State Zip

\_\_\_\_\_  
Home Phone Business Phone Additional Phone (cell) Email Address

## I. Personal & Background Information

- Are you at least 18 years of age?  Yes  No
- If hired, can you provide verification of your legal right to work in the United States?  Yes  No
- Have you been employed here before?  Yes  No
- List the date you would be available for work. \_\_\_\_\_

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**Note:** A "Yes" answer to the following questions will not automatically bar you from employment. The nature, job-relatedness, severity, frequency and date of offense in relation to the position for which you are applying are considered.

- Have you ever had a teaching certificate revoked or suspended?  Yes  No  
If yes, please explain \_\_\_\_\_
- Have you ever been convicted of a felony or misdemeanor, had adjudication of guilt withheld, or pled nolo contendere in the last seven (7) years?  Yes  No
- If "Yes" list offense, date and disposition of the case.

## II. Position Preferences

- Indicate those areas for which you are qualified and would accept employment:
  - Coordinator
  - Director
  - Principal
  - Guidance Counselor
  - Media Specialist
  - Substitute Teacher
  - Speech and Hearing Specialist
  - Teacher
  - Staff, describe \_\_\_\_\_
- Grade Level Preference (Teacher applicants):
  - Primary Education (through Gr. 3)
  - Elementary (K-6)
  - Middle (6-8)
  - Exceptional Student Education
  - Other: \_\_\_\_\_

## III. Certification Status

Official Transcripts of all college course work reflecting degree attained and major will be requested prior to a confirmed offer of employment.

- I now hold a valid Florida certificate: DOE # \_\_\_\_\_ Validity Period: \_\_\_\_\_ to \_\_\_\_\_
  - Temporary*
  - Regular*
  - Other (Please Specify)* \_\_\_\_\_Subjects shown on certificate \_\_\_\_\_  
(Please attach a copy of certificate)
- I do not hold a Florida certificate but I have been certificated in another State and am eligible to make application for a Florida certificate. (List status of eligibility) \_\_\_\_\_

## IV. Professional & Other Work Experience

- Please list the most recent experience first.
- Indicate all work experience and include military service, self-employment or unemployment.
- Attach additional sheet(s) if necessary.

- Name and Address of School or Business \_\_\_\_\_  
Position Title \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties \_\_\_\_\_ Starting salary \_\_\_\_\_ Ending salary \_\_\_\_\_  
Telephone Number \_\_\_\_\_ May we contact this employer?  Yes  No
- Name and Address of School or Business \_\_\_\_\_  
Position Title \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties \_\_\_\_\_ Starting salary \_\_\_\_\_ Ending salary \_\_\_\_\_  
Telephone Number \_\_\_\_\_ May we contact this employer?  Yes  No
- Name and Address of School or Business \_\_\_\_\_  
Position Title \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties \_\_\_\_\_ Starting salary \_\_\_\_\_ Ending salary \_\_\_\_\_  
Telephone Number \_\_\_\_\_ May we contact this employer?  Yes  No
- Name and Address of School or Business \_\_\_\_\_  
Position Title \_\_\_\_\_ Dates of Employment \_\_\_\_\_ to \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
Duties \_\_\_\_\_ Starting salary \_\_\_\_\_ Ending salary \_\_\_\_\_  
Telephone Number \_\_\_\_\_ May we contact this employer?  Yes  No

### V. Personal and Professional References

Provide names and complete addresses (including zip codes) of at least three (3) references. Beginning teachers should list their supervising teacher and college professor(s). Experienced teachers should list the names of their last two employers.

Name \_\_\_\_\_

Title/position \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Title/position \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Title/position \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

### VI. Supplementary Information

Please provide any additional information which may support your application: e.g., Team Teaching, Awards, Endorsements, Curriculum Writing, etc.

## VII. Applicant Statement

### **AUORIZATION FOR RELEASE OF INFORMATION**

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment, whenever it is discovered.

I understand that if hired to work in a school or other position requiring direct contact with students, I shall upon offer of employment be responsible for a complete background check including, but not limited to, background checks by the Federal Bureau of Investigation and the Florida Department of Law Enforcement. In addition, I understand that a condition of the application and/or employment process will require a drug and alcohol test of my urine and blood.

I understand that by submitting this application I authorize the employer to conduct verification of my education, previous employment/work history, now or at any time.

I have read and understand this consent for release of information and I authorize a background verification. I authorize persons, schools, current and former employers, and other organizations and agencies to provide the information requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of information.

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Applicant's Signature

Date