

DATE: _____

PLAQUEMINES PARISH SCHOOL SYSTEM

APPLICATION FOR CERTIFIED POSITIONS



The Plaquemines Parish School System does not knowingly discriminate against any employee or applicant for employment on the basis of race, color, religion, gender, sex, age, national origin or disability.

SECTION I PERSONAL INFORMATION

Name _____
LAST FIRST MIDDLE MAIDEN

Social Security Number: _____

Are you a citizen of the United States? Yes No If no, do you have a legal right to work in this country? Yes No

Phone (Home) _____ (Cell) _____ E-mail Address _____

Current Mailing Address: _____
Number & Street/Apt# City State Zip

Have you ever worked in a Louisiana school system? Yes No

Have you ever applied for a teaching position in Louisiana? Yes No

Are you retired from a Louisiana retirement system? Yes No

Are you currently certified for the position in which you are applying? Certified Not certified Not certified, but have applied

SECTION II POSITION DESIRED

Preferred Assignment (specify grade levels and subjects):
 1st Choice _____ Special Education Area(s) _____
 2nd Choice _____

Coaching Assignment and/or Student activities wish to sponsor: (list sports/activities)

SECTION III ACADEMIC RECORD

Institution and Location	Dates of Attendance From To MO/YR MO/YR	Degree & Date Awarded/Expected	Major Field of Study	Full or Part Time	GPA in major/ Overall

SECTION IV EMPLOYMENT INFORMATION-TEACHING EXPERIENCE (beginning with most recent)

No Teaching Experience

Dates From To MO/YR MO/YR	Name of School and District	Grade(s) & Subject(s) Taught	Address & Phone # of School(s)	Full or Part Time	Reason for Leaving

SECTION V EMPLOYMENT INFORMATION-OTHER THAN TEACHING

No additional employment experience

Dates From To MO/YR MO/YR	Positions	Name, Address & Phone# of Employee(s)	Reason for Leaving

SECTION VI CERTIFICATION INFORMATION

Do you have a valid Louisiana Certificate Yes No No, but have applied
 If yes, is your Louisiana certificate Current Expired?
 Louisiana Certificate: Type: _____ Number _____ Issue/Expiration Dates _____
 Area of Certification: _____
 Do you currently hold a valid certificate from another state Yes No If yes, indicate state: _____
 Area of Certification: _____
 Have you been admitted into an alternative certification program? Yes No
 If yes, which one? _____
 Do you hold a National Board for Professional Teaching Standards Certification? Yes No
 Have you been evaluated using the COMPASS evaluation rubric? Yes No

SECTION VII ADDITIONAL INFORMATION

1. When will you be available?(month/day/year) _____
 Are you currently under contract? Yes No Expiration date: _____ Current with? _____
 2. Are you on approved leave from a school system? Yes No If yes, ending date: _____
 Type of leave: Sabbatical Leave of Absence Other _____
 3. Have you ever been convicted of a felony? Yes No
 4. Have you ever been convicted of an offense against the law or are you now under charges for any offense against the law?
Yes No (Omit traffic violations other than convictions for DUI)
 5. Have you ever been terminated or recommended for dismissal by your employer? Yes No

SECTION VIII PROFESSIONAL REFERENCES (A Minimum of two)

Name and Position	Name of Institution, School	Complete Mailing Address	Telephone#/area code

SECTION IX RELEASE OF INFORMATION

Release of Evaluation Information

La. R.S. 17:3884 provides that a school board considering the employment application of a person who has been evaluated in another school system shall request such person’s evaluation results as part of the application process. Please be advised that, as part of the mandated process, your previous evaluation results will be requested. You have the opportunity to review the information received and provide any response or information as you deem appropriate. Written responses will be retained with your application.

Misconduct Disclosure

I authorize you to make investigations and inquiries of my personal, employment and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application. References and personal information which become part of this record are to be regarded as confidential and shall not be revealed to me. 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 the rules and regulations of the employing authority, if employed.

I certify that answers given herein are true and complete to the best of my knowledge. I have read and agree with the information provided to me.

Signature _____

Date _____