



Malvern School District

1517 South Main Street Malvern, AR 72104
Phone: 501-332-7500 Fax: 501-332-7501

Certified Position Application

"We are an equal opportunity employer."

We consider applications for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Name:		Phone #		Social Security Number:	
Present Address:		City	State	Zip	Until
Permanent Address:		City	State	Zip	Until
Email Address					
If veteran, give length of service		From:		To:	
Branch of Service:					
Position applying for:				Today's Date:	

ELEMENTARY TEACHER

Grade Preference	(1)	(2)	(3)	(4)	(5)
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SECONDARY TEACHER

Subject Preference	(1)	(2)	(3)	(4)	(5)
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List any honors received before or since graduation.

Present Salary:	Expected Salary:	When could you begin work?:
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If elected and conditions prove satisfactory, would you plan to teach here at least two years?

REFERENCES

	Name	Address	Phone Number	Occupation
1				
2				
3				
4				
5				

Note: Office Use Only.

Board Approved	Dates	School Year	Salary	Position Assigned	Building
Hired					
Retired					
Resigned					

Be sure to include a copy of your teaching certificate with application.

Note: The applicant should exercise the greatest care in preparing this form. Information given herein becomes a legal part of the contract in case of election. Please do not omit any item.

EDUCATIONAL HISTORY

School /University Order Taken	Name	Location	Dates Attended From To		Degree Awarded	Year
High School						
College						
College						
Other						
Other						
Other						

CERTIFICATION (or eligibility for certification)

Area of Certification _____ Date _____ State Issued By _____ Expires _____

Specifically Qualified To Teach _____

Majors (1) _____ Sem.Hrs. _____ (2) _____ Sem.Hrs. _____

Minors (1) _____ Sem.Hrs. _____ (2) _____ Sem.Hrs. _____

Overall Accumulative Point Average _____ Major Field Grade Point Average _____

Degree (Check highest level completed. Official transcript required.)

☐ Bachelor ☐ Bachelor +15 ☐ Master ☐ Master +15 ☐ Other _____

STUDENT OR PRACTICE TEACHING

School & Location	Grade/Subject	Length of Time From To		Mark	Critic Teacher Name & Address

CONTRACTED LICENSED TEACHING EXPERIENCE

School	Location	Grade/Subject	Days Contracted	Number Years	Length of Time From To	

NON-PROFESSIONAL EXPERIENCE

What types of work experiences have you had outside of the teaching field?

Employer and Location	Type of Work or Position	Length of Time From To		Number Years

What extra-curricular activities have you participated in and feel you could direct?

Activities

High School	
College	

List all sports you can coach and the number of years you have coached each sport.

	Football	Basketball	Baseball	Softball	Soccer	Golf	Tennis	Track	Swimming	Wrestling	Physical Education	Intramurals
Years Coached												

Underline any of the following which you are able to coach or direct successfully: Orchestra, Band, Boys' Chorus, Girls' Chorus, Debate, Declamation, Dramatics, Football, Basketball, Baseball, Track, Tennis, Boxing, Wrestling, Cheerleading, Playground Activities.

Hobbies	
Special Interests	
Travel	
Professional Organizations	
Social Organizations	
Fraternal Organizations	
Other Activities	

Have you ever been convicted of a felony or are you now under indictment or information for a criminal offense?			
	YES		No
If yes, give details:			

Have you ever been discharged or asked to resign from any position(s)? (List each and every employer.)			
	YES		No
If yes, give details:			

Have you ever contracted with a school district but had your employment terminated?			
	YES		No
If yes, give details:			

I authorize investigation of all statements contained in this application. I understand misrepresentation or omission of facts called for is cause for dismissal without notice at any time during my employment.

I agree, if employed, to follow all policies of the Malvern School District.

I agree to promptly notify the Malvern School District of any changes including address or phone number(s) during my employment.

I certify that the information I have provided to the foregoing questions is true and correct and that no attempt has been made to conceal pertinent information. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

I authorize my former employers and personal references to provide any information that they may have regarding me, whether or not it is in my personnel file. I hereby release them and their company or school district or its employees or anyone from all liability for divulging same.

Signature

Date

Note: To sign digitally, use the "Fill & Sign" feature, then place signature on Signature Line above.

Upon employment we will need a copy of your driver's license and social security card. We can make copies of these documents for you in our office.

Arkansas Act 1314 of 1997 requires criminal background checks as a condition of initial employment for local school districts.

Forms necessary for the background check may be obtained at the Superintendent's office. Check with Human Resources for the total amount for each check. You will need three checks or money orders; two are to be made payable to the Arkansas State Police and the third check or money order should be made payable to the Department of Human Services.

[illegible]