TEACHER APPLICATION FORM

WAYNE COUNTY BOARD OF EDUCATION
P.O. BOX 658
WAYNESBORO, TN 38485

Name in full
(Print)_____ Date _____

Are you known to schools/references by any other name? _____ Yes _____ No

If yes, What Name(s) _____

Present Address _____ Phone _____

Permanent Address _____ Phone _____

Email address_____

FOR ELEMENTARY POSITIONS ONLY: NUMBER IN ORDER OF PREFERENCE

____ Pre-Kindergarten	____Grade 1	____Grade 3	____Grade 5
____ Kindergarten	____Grade 2	____Grade 4	____Grade 6

FOR SECONDARY POSTIONS ONLY:NUMBER IN ORDER OF PREFERENCE

Middle School	High School	List major Teaching Area(s):
	____ Grade 9	_____
	____ Grade 10	_____
____ Grade 7	____ Grade 11	_____
____ Grade 8	____ Grade 12	_____

Please list activities you would be qualified and willing to sponsor:

_____

_____

_____

EDUCATIONAL DATA

Type of School	Name & Location of School	Major(s)	Degree	Years Attended	Number of semester hours
High School					
College					
College					
Graduate School					

THE WAYNE COUNTY SCHOOL SYSTEM IS AN EQUAL OPPORTUNITY EMPLOYER

CERTIFICATION DATA

Applicant should possess a valid Tennessee Teaching Certificate or be taking necessary steps to determine eligibility for certification					
Type of Certification	Grade	Date of Issue	Date Expires	Certificate Number	Subject Endorsement

TEACHING EXPERIENCE (Including Student Teaching if within three years)

Name and Location or School (Begin with most recent)	Grades or Subject	From Mo. Yr.	To Mo. Yr.	Reasons of Leaving

MILITARY EXPERIENCE

Branch of Service: _____ Rank: _____

Date of beginning of active service _____ Date of separation: _____

Number of months of active duty: _____

IMPORTANT SALARY INFORMATION

Experience Credit:
Number of years military service _____
Number of years teaching _____
(Including present year) _____
TOTAL _____

Check All Degrees Received
Bachelors _____
Masters _____
Masters plus 45 _____
Ed. Spec. _____
Doctorate _____

Social Security Number _____-_____-_____

WORK EXPERIENCE OTHER THAN TEACHING

Name and Location or County (Begin with most recent)	Name of Business	From Mo.Yr.	To Mo.Yr.	Reason for Leaving

Are you now under contract? _____

When are you available for an interview? _____

Have you ever been dismissed from a teaching position for cause? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes explain: _____

_____

The Wayne County School System is an Equal Opportunity Employer. It does not discriminate in its educational program, activities, or employment practices on the basis of race, sex, national origin, religion, creed, age, marital status, or disability as required by the Title VI of the Civil Rights Acts of 1964,Title IX of the Educational Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973. It is our policy that all decisions for employment will be based on the qualifications of the individual.

VOLUNTARY INFORMATION

WAYNE COUNTY SCHOOLS

The Federal Government requires the following information to be collected for statistical reporting as part of the school corporation's affirmative active program. ALL RESPONSES ARE VOLUNTARY. Refusal to answer will not result in adverse treatment of any applicant. This information is not used in the selection process nor released in a manner that identifies the individual.

DATE:

_____

Month Day Year

NAME:

_____

Last First Middle

SEX: Male _____ Female _____

Race:

_____ American Indian/Alaskan Native
_____Black/Non-Hispanic
_____White/Non-Hispanic
_____Asian/Pacific Islander
_____Hispanic

BIRTHDATE: _____

Month Day Year

TYPE OF POSITION FOR WHICH YOU ARE APPLYING:

_____Teacher/Administrator
_____Aide/Secretary
_____Bus Driver
_____Cook
_____Custodian/Maintenance

WAIVER
PUBLIC LAW 93-380
"FAMILY EDUCATION RIGHT AND PRIVACY ACT OF 1974"

I _____ being aware of the provisions of Public Law 93-380, "Family Educational Rights and Privacy Act of 1974" hereby affix my signature and provide a waiver of the above law's provisions.

I hereby grant authorization to the Wayne County Schools, the Personnel Office and all placement-administrators in the Wayne County Schools to:

1. Request any and all materials and information pertaining to my employment from any of my present or former employers, supervisors or co-workers in any bona-fide school corporation.
2. Request credentials from all educational institutions I have attended.
3. Request student teaching evaluation from any assigned classroom supervising teacher.

I further authorize:

1. Any bona-fide school corporation to release any and all information (written or verbal) pertaining to my employment in the school corporation to the Personnel Office of the Wayne County Schools.
2. Any or all educational institutions I have attended to release my placement credentials on request to the personnel Office of the Wayne County Schools.
3. My assigned classroom supervision teachers to release my student teaching evaluation to the Personnel Office of the Wayne County Schools.

_____ _____
Signature of Applicant Date

Although additional information is not required, please feel free to submit other materials, i.e. resume, picture, transcript, certificates, placement files along with this application.

I hereby certify that to the best of my knowledge and belief the foregoing statements are true, correct and complete. I further understand that this application will become a part of my permanent personnel file should I be employed by the Wayne County School System.

Signed _____