

Dickenson County Public Schools
P.O. Box 1127, Volunteer Street
Clintwood, Virginia 24228
Phone (276) 926-4643 Fax: (276) 926-6374

APPLICATION FOR EMPLOYMENT
PROFESSIONAL POSITIONS

Applicant's Full Name _____
(Last) (First) (M.I.) (Maiden Name)

Present Mailing Address _____
(Street) (City) (State) (Zip)

Permanent Mailing Address _____
(Street) (City) (State) (Zip)

Telephone Numbers
Present: () _____ (Permanent: () _____ Work: () _____

Social Security Number _____ (Note: Completion of number is optional. Failure to submit social security number on this form will not prohibit employment consideration. Social Security number will be required on other forms prior to employment.)

MARK THE APPROPRIATE BOXES: INDICATE POSITION(S) DESIRED FOR WHICH YOU ARE ENDORSED

- | | | |
|---|--|---|
| <input type="checkbox"/> New Application | <input type="checkbox"/> Teacher | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Previous Application on File | <input type="checkbox"/> Guidance | <input type="checkbox"/> Supervisor |
| <input type="checkbox"/> Former Employee of the School Division | <input type="checkbox"/> Library/Media | <input type="checkbox"/> Psychologist |
| | <input type="checkbox"/> Other (Explain) | <input type="checkbox"/> Visiting Teacher/Social Worker |

Are you a U.S. Citizen?
 Yes No

If not, are you eligible to work in the U.S.?
 Yes No
List grade level(s) and/or subjects in order of preference:

FOR OFFICE USE ONLY:

Application received:

(Date)

Personnel Office Review:

Reviewer/Date

The Dickenson County School Board does not discriminate on the basis of race, color, national origin, age, religion, political affiliation, disabling condition, or sex in its educational programs or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in activities involved in the position or program for which application has been made.

I. EDUCATIONAL AND PROFESSIONAL TRAINING (List chronologically.)

| Level of Education | Name of School or University | State | Field of Study | Type of Degree | Year of Graduation | Dates of Attendance From...To |
|--------------------|------------------------------|-------|----------------|----------------|--------------------|-------------------------------|
| High School | | | | | | |
| College/University | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

If not graduated, expected graduation date.

II. STUDENT TEACHING EXPERIENCE (List chronologically and include any internships.)

| Name of School | School Division City/County | State | Grade Level and/or Subject | Dates |
|----------------|--------------------------------|-------|----------------------------|-------|
| | | | | |
| | | | | |
| | | | | |

Name of Supervising Teacher _____

Address _____ Telephone () _____

III. TEACHING EXPERIENCE (List chronologically and include any Internships. Contracted experience only.)

| Name of School | School Division City/County | State | Position Held Grade Level and/or Subjects Taught (Specify) | Dates Mo./Day/yr. (From...To) | Total Years | Full Time (✓) | Part Time (✓) |
|----------------|--------------------------------|-------|---|-------------------------------------|----------------|---------------------|---------------------|
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IV. WORK EXPERIENCE OTHER THAN TEACHING (list chronologically and Include any internships.)

| Employer | City/County | State | Kind of Work | Dates of Employment |
|----------|-------------|-------|--------------|---------------------|
| | | | | |
| | | | | |
| | | | | |

V. MILITARY EXPERIENCE

| Branch of Service | Occupational Specialist (MOS) | Inclusive Dates | Type of Discharge |
|-------------------|-------------------------------|-----------------|-------------------|
| | | | |

VI. REFERENCES

Applicants with educational experience must include principal, department chairman, supervisor and/or superintendent related to contracted teaching experience in order of recency. A minimum of three references is required.

| Name of Reference | Position | Present Address (Street/City/State) | Telephone |
|-------------------|----------|--|-----------|
| | | | |
| | | | |
| | | | |

VII. PROFESSIONAL LICENSURE

A. If you have been issued a Virginia license please submit a photocopy..... Copy enclosed? No Yes

Type of Virginia license Provisional Collegiate Professional Postgraduate Professional

Year of Expiration of Virginia license _____ Endorsement(s) _____

Have you applied for a Virginia license? No Yes When _____ Check if statement of eligibility enclosed.

B. If you have been issued a license of certificate in another state, please submit a photocopy.....

Copy enclosed? No Yes

State _____ Expiration Date _____ Certification/Endorsements _____

State _____ Expiration Date _____ Certification/Endorsements _____

C. Have you taken the National Teacher’s Examination/PRAXIS? (If yes, please submit a copy of your scores.)

Core Battery: No Yes _____ Copy enclosed? No Yes
Month Year

Special Area: No Yes _____ Copy enclosed? No Yes
Month Year

VII. GENERAL INFORMATION

Month, Day, and Year available for employment_____. Are you under contract? No Yes

If yes, where? _____ Present Position _____

If under contract, what type: Annual/Probationary Continuing/Tenure Other (Explain)_____

Have you ever been refused renewal of a contract? (If yes, explain below.) Yes No

Have you ever been discharged or requested to resign from a position? (If yes, explain below.) Yes No

Have you ever been convicted of a violation of law other than minor traffic violations? (If yes, explain below.) Yes No

Have you ever been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? (If yes, explain Below.) Yes No

EXPLANATIONS:

IX. OTHER INFORMATION

Estimate your total absence from work or school for the last three years and explain the reason(s) _____

Explain any physical or mental conditions which adversely affect your ability to perform duties of the position you seek, or if there are none, so state.

List personal interests/hobbies/talents:

X. PERSONAL STATEMENT

On a separate sheet, please explain your personal philosophy of education. Also feel free to provide any additional information you would like us to consider in reviewing your application.

My signature below authorizes the school division to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other sources deemed appropriate in the sole discretion of the school division. I waive my right of access to any such information, and without limitation hereby release the school division and the reference source from any liability in connection with its release or use. This release includes the sources cited above and illustrative examples as follows: the local Sheriff, information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Services Child Protective Services Unit and any Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, I unconditionally certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I acknowledge that these questions shall be continuing in nature, and I have a duty to update, change or further amplify my answers to guarantee accuracy at all times. I understand that any omission, misleading or falsely answered statement made or implied by me on this application, or any supplement to it, whether written or oral, will be sufficient grounds for failure to employ or for my immediate discharge should I become employed with the school division. In the event the School Board determines, in its sole discretion, the existence of a material adverse report or omission as to any information, I agree that the employment offer/appointment will be deemed revoked immediately without further action, notice, or process. In conclusion, I acknowledge that if accepted for employment, I hereby agree to abide by the policies, regulations, and directives of the school division.

My signature below certifies that I have not been convicted of a felony, a crime of moral turpitude, or any offense involving the sexual molestation, physical or sexual abuse or rape of any child. I further acknowledge I am aware that any person making a materially false statement regarding any such offense shall be guilty of a Class I misdemeanor and upon conviction, the fact of said conviction shall be grounds for the Board of Education to revoke my license to teach.

I also certify that I have not been the subject of a founded case of child abuse or neglect.

Signature of Applicant

Date

**Personnel Department
Dickenson County Public Schools
P.O. Box 1127
Clintwood, Virginia 24228**

Confidential Rating of (name) _____

The above named applicant has made application to the Dickenson County School Board for the position of:

Please complete the checklist below and return it to us in the envelope provided by the applicant.

| | Superior | Good | Average | Fair | Poor |
|--|----------|------|---------|------|------|
| Ability to Discipline/Classroom mgt. | | | | | |
| Cooperation/Receptive to Suggestions | | | | | |
| Dependability | | | | | |
| Health and Vitality | | | | | |
| Skill as Instructor | | | | | |
| Word Usage/Communication | | | | | |
| Appearance: Appropriateness and Neatness of Dress | | | | | |
| Emotional Stability | | | | | |
| Leadership/Initiative | | | | | |
| Scholarship | | | | | |
| Knowledge of Subject Matter | | | | | |
| Poise and Confidence | | | | | |
| Rapport with Children | | | | | |
| Relationship with Adults | | | | | |
| Professional Spirit | | | | | |
| Character | | | | | |
| General Evaluation | | | | | |

Is there, to your knowledge, any reason why the applicant could not perform the duties of the job for which application is made?

Yes _____ No _____

Comment: _____

Name (Type or Print)

Position

Signature

Address

Date _____

Telephone _____

Dickenson County Public Schools
Human Resources Department
P.O. Box 1127, 309 Volunteer St.
Clintwood, VA 24228
Phone (276) 926-4643 Fax (276) 926-6374

Teaching and Administrative Applicants:

We invite you to apply for employment with the Dickenson County Public School System. Our employment procedure is outlined below. Please read the instructions carefully before completing your application. Applications will not be considered until all components are received in our office.

A complete application packet must include:

1. **A completed Application for Employment for Professional Positions. Please be sure to answer all questions as well as date and sign the application.**
2. **A copy of your Virginia Teaching Certificate – If you hold a Virginia Teaching Certificate, current or expired, you must submit a copy with your application. If you are certified by another state, submit a copy of that certificate with your application. An applicant does not need to possess a certificate to receive employment consideration with Dickenson County Public Schools; however, applicants must be eligible for a Virginia certificate. Any questions concerning eligibility should be directed to:**

Certification Office
Virginia Department of Education
P.O. Box 2120, Richmond, VA 23218-2120
Phone (804) 225-2022

3. **Three letters of reference – A college placement file is acceptable. If you have full-time experience as a classroom teacher or administrator, at least one reference must be from your principal or immediate supervisor.**
4. **Transcripts of all college coursework – Unofficial transcripts are acceptable for your initial application. Should you be offered employment, official transcripts must be provided.**
5. **Praxis Scores – copies of scores in the core areas as well as content area(s) should be provided if available. VCLA scores and VRA scores if applicable should also be included.**
6. **Virginia law requires that individuals who accept a position with Dickenson County Public Schools be fingerprinted for the purpose of conducting a criminal background investigation. If you are offered a position, you will be notified of the time and place for completing this procedure.**

Completed applications will be reviewed by the Superintendent or his designee. Applicants will be considered for all positions for a period of one year from the date the application is received. If you continue to be interested in employment with the school division after one year, you must submit a written request to have your application reactivated.

For further information, contact:

Superintendent
Dickenson County Public Schools
P.O. Box 1127,
Clintwood, VA 24228
Website: www.dickenson.k12.va.us