

APPLICATION: PROFESSIONAL POSITION

Date of Application: _____

Return to: POTEAU BOARD OF EDUCATION, 100 MOCKINGBIRD LANE, POTEAU, OK 74953

POTEAU INDEPENDENT SCHOOL DISTRICT #29 IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, SEX, DISABILITY OR AGE. (Download this application at www.poteau.k12.ok.us) Include copy of certification and all transcripts.

(Please type or use ink to complete application)

Name _____ Other Name(s) Known by: _____

_____ (Last) _____ (First) _____ (Middle)

Address _____ Town _____ State _____ Zip _____ Telephone _____ Cell _____

Preferred Assignment _____ Oklahoma Teacher # _____ Certificate # _____ Type _____ Expires _____

Please include copy of certification and all transcripts.

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

Are you related to a current Board of Education Member? Yes _____ No _____

The Superintendent of schools, if he/she should determine to do so as authorized by law and board policy, has my approval to request a felony record search.

_____ (Signature)

EDUCATION

LEVEL	NAME OF INSTITUTION	ADDRESS CITY AND STATE	COLLEGE MAJOR SUBJECT	COLLEGE MINOR SUBJECT	DATE OF GRADUATION	TYPE OF DEGREE
High School						
College / University						
Undergraduate						
Graduate						

TEACHING EXPERIENCE

(List in order of most recent experience--include Student Teaching & Name of Co-operating Teacher)

School or Organization	Type of Duty Subject or Grades Taught (Use other side if necessary)	Date From To	Complete Name of Supervisor	Address-Zip Code	Statement in Placement Folder?

OTHER WORK EXPERIENCE

(Over)

REFERENCE

NAME Complete Address (including Zip) Statement in Placement

Do you have a placement folder available at your University? Yes _____ No _____ University Address _____

If you are having a folder forwarded to us, please indicate. Yes _____ No _____ _____

PLEASE NOTE: THIS APPLICATION WILL REMAIN ACTIVE FOR THREE YEARS

I agree that references supplied to the school district will not be examined by anyone except those responsible for employment. This agreement extends to my not having access to those references. Those persons providing references shall not be informed of this agreement.

Signature
Date: _____

REMARKS: _____
