

Application for Certified Instructional or Administrative Position

DateAccepted:	
Accepted By:	

Do Not Write In This Space.						
	Basic Information W-4 Form ID Forms Loyalty Oath Ethnicity Form					
	Criminal History Check Oklahoma Certification					

Sallisaw OK 74955

918-775-5544		Loyalty Oath Ethnicity Form Criminal History Check				
Personal			☐ Crir			
Last Name	First Name		Middle	Home Phone		
Street Address				Mobile Phone		
City	State		Zip	Business Phone		
lave you ever applied for employment with Sallisaw Public: Yes No If Yes: Month and Year:		Social Security Number (optional)				
lave you ever been employed with Sallisaw Public Schools b		Position Applying For				
lame of Relative		Relationship		Position Held		
Alternate Contact (Person who will know where you may be		Phone				
Certificate						
Oklahoma Teaching Certifica	te Number		Expiration D	pate://		
(Attach Photocopy of Certifica	ate)					
☐ Pending (If certificate is not re	ceived within six months, a	pplication will be disc	arded.)			
Out-of-State Teaching Certific	ate Number					
Area(s) of Intere	est					
Elementary	□ Pre-K	□Kindergarten	Grades 1-3	Grades 4-5		
Secondary	☐ Grades 6-8 ☐ Language Arts ☐ Foreign Language	Grades 9-12 Math Tech Education	□ Science □ Vocational Ed.	☐ Social Studies ☐ Home Ec.		
Elementary	☐ Elementary K-5	Secondary 6-12	Speech Path.	☐ Psychologist		
General	☐ Administrator ☐ Art	☐ Principal ☐ Music	□ Counselor □ PE/Health	☐ Media Specialist		

Other											
Educat	 tion										
		ocation of School/Ur	niversity	Course of Study Major/Minor		Number of Years or Credit Hours		Did you Graduate?	Degree, Diploma or Certificate Received		
High School				IVIGJOI/IVIII IOI		Completed				Received	
College							╬				
College											
College											
Teachi	ng Exper	ience									
List in chronological orde	r beginning with the most rece	nt, including student teaching, if a	oplicable.					· 1r	1	-	
Name and F	Phone Number of	f School/Business	Principal	/Supervisor	Gro	rade/Subject	No. o Years		n /ear	To Month/Year	
								<u> </u>	\dashv		
Non-To	eaching l	Experience	e								
		nt, including student teaching, if a					No. o	, II From		To	
Name and Phone Number of School/Business			Principal/Supervisor		Gro			o. of From Month/Yea		ar Month/Year	
Refere	ences										
Character References (not	·	1									
Full Name	Full Name of Reference Title		Cor		ompany/School		_ _	Phone Number			
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]					$\dashv \vdash$				
How did you h	near about us?										
	1 11-1-1-										
How did you le	earn about this jo ee or Friend	b opening'? Newspaper	□Inte	ernet	□Wa	lk-In]Othe	r			

Felony Questionaire Have you ever: ☐ Yes ☐ No Entered a plea of guilty or nolo contendere to a state or federal charge? ☐ Yes ☐ No Been convicted of a state or felony offense? ☐ Yes ☐ No Been charged with a state or federal felony offense which was reduced to a misdemeanor offense to which you entered a plea of guilty or nolo contendere? ☐ Yes ☐ No Entered a plea of guilty or nolo contendere to, or been convicted of, a state or federal misdemeanor charge involving illegal chemical substances or illegal sexual activity? ☐ Yes ☐ No Been approved for or entered into a deferred prosecution agreement with any prosecuting authority? If yes to any of the above questions, please explain in detail: Applicant understands providing a false response to one or more of the above questions will deny employment or may cause dismissal from employment if the false response is learned of after employment. Signature I hereby declare the information provided by me in this application for employment and supporting documentation is true, and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application or my supporting documentation shall be considered cause for dismissal. My signature below authorizs investigation of all statements made by me on this application and authorizes Sallisaw Public Schools to contact my references and former employers (as indicated) and authorizes contacted persons to respond to questions from Sallisaw Public Schools. I further authorize Sallisaw Public Schools to conduct a criminal background check. This application will be retained for no more than one year. If I am not hired during that period of time, I must complete a new application in order to be considered for employment. It is my responsibility to notify human resources of my intent to apply for any open positions at Sallisaw Public Schools. Sallisaw Public Schools is an Equal Opportunity Employer and does not discriminate on the basis of race, religion, color, national origin, gender or disability. This policy encompasses recruitment, selection, assignment, promotion and other terms, conditions and benefits and privileges associated with employment. This policy also extends to the educational programs and activities operated by the district.

To ensure consideration for an employment interview, applicant must provide the following documents to complete the applications file: (1.) Cover letter expressing desired position and interest in the Sallisaw School System. (2.) Resume (3.) Oklahoma Teaching Certificate (or assurance of ability to be certified) (4.) Transcripts (5.) A copy of a daily lesson plan.

Date

Signature of Applicant

