

OFFICE USE ONLY File: _____ Ack: _____ Ref:(1)_____(2)_____ Interview Date: _____ LA. Certified: _____	BOGALUSA CITY SCHOOLS 1705 Sullivan Drive Bogalusa, LA 70427 APPLICATION FOR CERTIFICATED POSITIONS Application for: ___ Teacher ___ Ancillary Position ___ Pupil Appraisal ___ Other _____ Date: _____	OFFICE USE ONLY Assigned to: _____ Effective Date: _____ Length of contract: _____ Grade/Subject: _____ Position Code: _____ Replacing: _____ Contract Code: _____ Degree: _____ Experience: _____
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NOTICE TO APPLICANT

The Bogalusa City Schools does not knowingly discriminate against any employee or applicant for employment on the basis of race, color, religion, gender, age, national origin, handicap, or status as a Vietnam era or disabled veteran. This policy encompasses recruitment, selection, assignment, promotion, transfer, termination, compensation, training and apprenticeship, and all other terms, conditions, benefits, and privileges associated with employment. This policy extends to the educational programs and activities operated by the state, districts, and schools. Discrimination is specifically prohibited by Title IX of the Education Amendments of 1972, as amended, and Title 45, Subtitle A, Part 66, of the implementing regulations administered by the Director of the Office of Civil Rights of the United States Department of Health, Education, and Welfare.

Section I Personal Information

Name: _____		
LAST	FIRST	MIDDLE
Social Security Number: _____		
Are you a citizen of the United State? ___Yes ___No		
Current Phone Number _____ Alternate Number _____ E-mail Address _____		
Permanent Mailing Address _____		
NUMBER AND STREET/APARTMENT NUMBER		
CITY	STATE	ZIP
Current Mailing Address ___ same as permanent address ___ different from permanent address and valid until _____		
(month/day/year)		
NUMBER AND STREET/APARTMENT NUMBER		
CITY	STATE	ZIP
Have you ever worked in a Louisiana school system? ___Yes ___No		
Have you ever applied for a teaching position in Louisiana? ___Yes ___No		
Have you ever applied for a non-teaching position in a Louisiana school system? ___Yes ___No		
Are you retired from a Louisiana retirement system? ___Yes ___No		
If yes, name the school system from which you retired _____ Date of retirement _____		
Are you currently certified for the position for which you are applying? ___Certified ___Not certified ___Not certified but have applied		

Section II Position Desired

Preferred Assignment (specify grade levels and subjects):	
1 st choice _____	
2 nd choice _____	
3 rd choice _____	
Special Education Area(s): _____	Vocational Education Area(s): _____
If you wish to be considered for a coaching assignment, list sports (with experiences and records) in order of preference: _____	
What student activities are you willing to sponsor? _____	
What proficiencies do you have in computer technology? _____	

Section III Academic Record (Beginning with the most recent)

Institution and Location	Dates of Attendance From To	Degree & Date Awarded or Expected	Major or Field of Study	Full or Part Time	GPA in Major/GPA Overall

Section IV Student Teaching Experience (Beginning with the most recent)

Complete this section only if you completed student teaching within the last three years.

Dates From To	Name of School & School District	Grade (s) and or Subject(s) Taught	Name, Address, and Phone Number of Cooperating Teacher(s)	Name Address and Phone Number of University Supervisor(s)

Section V Employment Information - Teaching Experience (Beginning with the most recent)

Dates From To	School District	Grade(s) and/or Subject(s) Taught	Name, Address, and Phone Number of School District	Reason for Leaving

Section VI Employment Information - Other Than Teaching (Beginning with the most recent)

Include part-time work and education related experience. _____ No additional employment experience

Dates From To	Position	Name, Address, and Phone Number of Employer(s)	Reason for Leaving

Section VII Certification Information

Do you hold a valid Louisiana certificate? ____ Yes ____ No, but have applied
 If yes, is your Louisiana certificate: ____ current ____ expired?
 Louisiana Certificate: Type (Circle One) A B C Level ____ OP Number _____ Date Issued ____
 List areas of certification:

Section VII Certificate Information (continued)

Do you currently hold a valid certificate from another state? Yes No No, but have applied.
 If yes, indicate state _____
 Out-of-State Certificate: Type _____ Number _____ Date Issued _____
 List areas of certification: _____

 Do you hold a National Board for Professional Teaching Standards Certification? Yes No

Section VIII PRAXIS/NTE SCORES

National Teacher Examination (NTE)
 Have you taken the NTE (required through 08/31/99)? YES No
 If yes, when? _____ If yes, provide the following scores.
 Professional Knowledge Score _____ General Knowledge Score _____
 Communication Skills Score _____ Specialty Area Score _____

PRAXIS Examination
 Have you taken the PRAXIS (required as of 09/01/99)? Yes No
 If yes, when? _____ If not, when do you plan to take it? _____
 If yes, provide the following scores.
(PPST) Written Test Reading Score: _____ Writing Score: _____ Mathematics Score: _____
OR
Computer Base Test Reading Score: _____ Writing Score: _____ Mathematics Score: _____
Other Test (s)
 Name of Test _____ Test Code: _____ Score _____
 Name of Test _____ Test Code: _____ Score _____
 Name of Test _____ Test Code: _____ Score _____
 Name of Test _____ Test Code: _____ Score _____
 Name of Test _____ Test Code: _____ Score _____
 Name of Test _____ Test Code: _____ Score _____

Section IX Extra-Curricular Activities

Organization Name	Position	Years	Average Hours Per Week	Description of Activity

Section X Professional References

Non-experienced teachers -Send reference requests to student teaching university supervisor(s), cooperating teacher(s), and school principal(s).
Experienced teachers - Send reference requests to principals, supervisors, and others who have observed and/or evaluated you **most recently**. A minimum of two (s) references must be submitted.

Name and Position	Name of School/District	Complete Mailing Address	Telephone Number (Including area code)

Section XI Additional Information

1. When will you be available? (Month/day/year)
Are you currently under contract? Yes No Expiration Date _____
Where are you under contract? _____
2. Are you on approved leave from a school system? Yes No If yes, ending date _____
Type of leave: Sabbatical Leave of Absence Other, explain _____
3. Are you related to an employee/board member of the Bogalusa City Schools? Yes No
If yes, list employee/board member's position and relationship.
Position _____ Relationship _____
Position _____ Relationship _____
Position _____ Relationship _____
4. Have you ever been convicted of a felony? Yes No
5. Have you ever been convicted of an offense against the law or are you now under charges for any offense against the Law?
You may omit: (1) traffic violations other than convictions for driving intoxicated; and (2) any offense committed before your 17th birthday which was finally adjudicated in a juvenile court or under a Youth Offender law. Yes No
6. While in the military service, were you convicted by a general court-martial? Yes No Non-applicable
7. Have you ever been terminated or recommended for dismissal by your employer? Yes No

IF YOU CHECKED YES FOR QUESTION 4, 5, 6, AND/OR 7 IN SECTION XI

Briefly explain in the space below:

8. Did you participate in the Louisiana Teacher Assistance and Assessment Program (LTAAP)? Yes No
When? _____ Where? _____
Did you successfully complete the program? Yes No

Section XII Release of Information

Release of Assessment and Evaluation Information

La.R.S. 17:3884(D) requires that any school board wishing to hire a person who has been assessed or evaluated pursuant to the Children First Act, La.R.S. 17:3871, et seq., whether that person is already employed by that school system or not, shall request such person's assessment and evaluation results as part of the application process. Please be advised that, as part of the mandated process, your previous assessment and evaluation results will be requested. You have the opportunity to apply, review the information received, and provide any response or information you deem appropriate.

Misconduct Disclosure

I authorize Bogalusa City Schools to make investigations and inquiries of my personal, employment, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application. Bogalusa City Schools reserves the right to reject an incomplete application and further reserves the right to dispose of any application which is not current in a one-year period. References and personal information with become a part of this record are to be regarded as confidential and shall not be revealed to me. In the event of employment, I understand that false or misleading information given in my application given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employing authority, if employed.

I certify that answers given herein are true and complete to the best of my knowledge. I have read and agree with the information provided to me.

Signature _____ Date _____