

Date _____

OFFICE USE ONLY

Position _____

OFFICE USE ONLY



Tell City – Troy
Township School
Corporation

837 17th Street

Tell City, IN 47586

APPLICATION FOR A PROFESSIONAL POSITION
 IN THE
TELL CITY-TROY TOWNSHIP SCHOOL CORPORATION
TELL CITY, INDIANA 47586

(Optional)
 Picture
 of
 Applicant

"AN EQUAL OPPORTUNITY EMPLOYER"

Date: _____

Type of Position Applying For:

SUBJECT AREA(S):

LEVEL

____ Administration

____ Elementary

____ Jr. High/Middle

____ Special Education

____ Other: (Explain) _____

1. _____

2. _____

3. _____

I. NAME IN FULL: _____

Current Address is: _____ Phone _____

City _____ State _____ Zip Code _____

Until _____

Permanent Address is _____ Phone _____

City _____ State _____ Zip Code _____

II. RECORD OF EDUCATION:

Please list the high school(s) and college(s) you have attended.

Institution	Location	Dates of Attendance	Diploma/Degree & Date

Student Teaching (if within the last five years):

Subject or Grade Level _____ Length of Teaching _____

School _____ Cooperating Teacher _____

Address _____

III. TEACHING EXPERIENCE

Total years teaching experience _____

Name and Address of School System	Grades/Subjects Taught	Dates	Reason for Leaving

Have you been discharged, refused renewal of contract, or requested to resign from a position?
 Yes ___ No ___

If yes, give details of such action. _____

IV. WORK EXPERIENCE: List below your work experiences other than those related to teaching.
 (Within the last five years)

Employer	Type of Work	Dates of Employment	Reason for Leaving

V. REFERENCES: If you have teaching experience, please list three references from teachers, principals, or superintendents that you have worked for. If you do not have teaching experience, please list three references from employers for whom you have worked.

Name	Address	Phone	Position

VI. EXTRA-CURRICULAR ACTIVITIES: Please check the areas you feel qualified to direct or have participated in.

Activity	Participated In	Can Direct	Activity	Participated In	Can Direct
Band			Cheerleading		
Choir			Basketball		
Orchestra			Baseball		
Debate			Football		
Drama			Track & Field		
Publications			Wrestling		
Dept. Clubs			Volleyball		
Academic			Tennis		
Nat'l Honor Society			Golf		
Drill Team Auxiliary			Cross Country		
Swimming			Softball		

List positions of RESPONSIBILITY and LEADERSHIP which you have held.

In High School _____
 In College _____
 Other _____

List and SPECIAL HONORS received.

VII. LICENSING AND RETIREMENT INFORMATION:

Hold or have applied for Indiana License in: Subject/Grade Level _____
License Number: _____
License is valid until what date? _____
Hold valid out-of-state license in state of _____
in the following subjects/grade levels _____
Indiana Retirement Fund Number _____ (experienced teachers only)

VIII. GENERAL PROFESSIONAL INFORMATION:

- A. Are your credentials on file at any College Placement Bureau? Yes _____ No _____
If so, what is the name of the institution? _____
Address of the institution? _____
- B. To what professional organizations do you belong? _____

IX. SIGNATURE OF APPLICANT:

I hereby certify that the information supplied in this application is true and correct.

Signature _____ Date _____

(Falsification of any part of this form may be cause for rejection of the application and/or any subsequent employment contract)

Please include the following information:

1. A letter of interest.
2. A resume of your qualifications.
3. A separate statement stating a philosophy of education.
4. A statement of your professional goals.

**MAIL APPLICATION TO: OFFICE OF THE SUPERINTENDENT
TELL CITY-TROY TOWNSHIP SCHOOL CORPORATION
837 17TH STREET
TELL CITY, INDIANA 47586**

NOTE: If employed, this information will be kept in the superintendent's office and filed in the teacher's individual folder. **This information is strictly confidential.** This application will be kept on file three years from the date of the application.