

D'ARBONNE WOODS CHARTER SCHOOL

Teacher Application

Office use only
 ___ Certificate
 ___ Needs LA Certificate
 ___ 1 Reference
 ___ 2 Reference
 ___ 3 Reference
 ___ Photo
 ___ Complete

SECTION I PERSONAL INFORMATION

Name (Last)	(First)	(Middle)	(Maiden)
Present Address :			
(City)	(State)	(Zip Code)	
Social Security # :		Date of Birth :	
Home Phone:			
E-mail Address			
Permanent Address (If not same as above)			

SECTION II CERTIFICATION INFORMATION

1. List degrees and certifications: _____
2. Louisiana certificate number and type: _____
3. Other valid state certification: _____
4. National Board Certification: ___ Yes ___ No ___ Currently awaiting scores
5. Highly Qualified: Yes No What areas? _____

SECTION III TEACHING EXPERIENCE

Dates: From	To	Name of School	Location	Grade or Subject	Supervisor/Principal Name, Address, Phone

SECTION IV

EDUCATIONAL BACKGROUND

Dates: From	To	Name and location of College or University and High School (Graduate and undergraduate—beginning with the most recent college experience)	Degrees Received	Major	Minor

SECTION V

ADDITIONAL TRAINING AND PROFESSIONAL DEVELOPMENT

(Use additional paper to answer these questions if necessary)

1. What, if any, computer programs are you skilled in? _____

2. What extracurricular activities do you have experience in sponsoring? _____

3. List any organizational memberships that you have that you feel are relevant to your ability to teaching.

4. Have you participated in any of the following professional developments?
 Brain-Base Learning Mountain Math Accelerated Reader/Math Thinking Maps
 Teaching/Learning Styles (Gardner) LEAP remediation training
 Other (list) _____

5. Have you participated in any faculty book studies? If so, name them. _____

6. List any school or parish-wide committees that you have participated in or chaired.

7. List any educational awards, publications, or achievements.

SECTION VI

REFERENCES

Please list three references, other than the principal(s) and supervisor(s) previously listed and other than relatives, who can truthfully attest to your administrative ability, character, personality, scholarship, and work ethic. These people *will* be contacted.

Name	Position	Relationship	Address	Phone #

TO APPLICANT: All applications and accompanying records become the property of D'Arbonne Woods Charter School and are not available to candidates. Many people will not complete a reference unless confidentiality can be assured. **I agree for this application to be confidential and by signing and dating the waiver and access below, I, the undersigned, waive any right of access to this reference.**

Signature of applicant: _____ Date: _____

SECTION VII

GENERAL INFORMATION

(use additional paper, to explain, if necessary)

1. Are you currently under contract? If so, where? _____

2. Have you ever been discharged, requested to resign, or refused tenure? Explain. _____

3. Are you retired from any Louisiana school district? Which system? _____

4. Have you ever been convicted of any felony or misdemeanor? If so, please explain. _____

5. Are you able to perform the duties (with or without reasonable accommodations) of the position for which you applying? _____

"I hereby certify that the information given in this application is true, accurate, and complete. I authorize D'Arbonne Woods Charter School, Inc. to investigate all statements made in this application. I understand that any misrepresentation, omission of facts, or falsification of facts shall be immediate justification for disqualification from employment consideration or termination, if employed. I herewith authorize D'Arbonne Woods Charter School, Inc. to request and receive confidential release of documentary materials relating to me, regardless of physical form or characteristics, prepared, owned, used, in the possession of, or retained by: (1) educational institutions I have attended, (2) previous employers of mine, and (3) city, parish, state, and federal law enforcement authorities. I understand that if D'Arbonne Woods Charter School, Inc. seeks to employ me that I will: (1) willingly consent to being fingerprinted and (2) give written permission for a criminal background investigation."

 (Print Name)

 (Signature)

 (Date)