



Earle School District

P.O. Box 637

Earle, AR 72331

870-792-8486 Main Office

Certified Employment Application

Please answer all questions which apply to you. If they do not apply, mark them N/A. Please print, type, or write legibly.

- Application for employment with the Earle School District are accepted without regard to sex, race, age, national origin, handicap/disability, or religion.
- Applications, once filed, may be subject to disclosure as a public record under the Arkansas Freedom of Information Act.
- Applications filed do not create a contract of employment with the Earle School District. If an individual is hired as a certified worker, he/she will also be required to provide a valid teacher's certificate, principal's certificate, supervisor's certificate, or administrative certificate.
- Qualified applicants with disabilities as defined in the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990, may request any needed accommodations to participate in the application process.

Date _____

Name _____

Last **First** **Middle** **Maiden Name**

Present Address _____

Number/Street **City** **State** **Zip**

Permanent Address _____

Number/Street **City** **State** **Zip**

Home Phone () _____ **Work Phone** () _____ **Message** () _____

Earle School District

Position (s) Applying For

(In Order of Preference)

1. _____
2. _____
3. _____
4. _____

Grade Level Preference

Degree(s) _____

Certified Field(s)

Present

Employer _____

Present

Position _____

Social Security

Number _____

Please Note:

- Copies of al college transcripts and Arkansas Certificates must be with this application.
- This application is active for a period of two years. If not updated in that period of time, it will no longer be considered

Earle School District

Military History

If you believe you may be eligible for veteran's preference consideration, complete this section. The Arkansas Veterans Preference Acts states specific requirements which must be met in order to be eligible for veteran's preference. For consideration of veteran's preference, proof such as DD-24, current letter from the Veterans Administration, or other official documentation may be required. Specific questions regarding veteran's preference should be addressed to individual state agency personnel offices.

Have you served on active duty in the United States military, excluding Active Duty for Training (AcuDutra) and Reserve Military Annual Training (AT)?

Branch of service _____

Date of discharge _____

Type of discharge _____

How Did You Learn Of This Job Opening?

- Newspaper**
- Employment Security Department**
- Agency Announcement**
- Educational Institution – Name of Institution:**

School District Website _____

Other Explain _____

Earle School District

Equal Employment Data: This section is designed to collect information which will be used in the completion of various state and federal reports and will not be used in processing of, or remain a part of, your application. The completion of this section is voluntary.

Applicant's Name _____

Last

First

Middle

Maiden Name

Social Security Number _____

DOB MM/DD/YYYY

- Male**
- Female**

Check One Of The Four (4) Listed Which You Consider Yourself To Be:

- White** (Descendent of the original peoples of Europe, North Africa, or the Middle East.)
- African-American** (Descendent of the Black racial groups of Africa)
- American Indian or Alaskan Native** (Descendent of any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition)
- Asian or Pacific Islander** (Descendent of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands)
- Hispanic** (A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish Culture origin, regardless of race)

Educational History

High School

Dates

Total

_____ City
_____ State _____

From _____ **to** _____ **YRS** _____

Undergraduate Schools

1. _____ City _____ State _____

From _____ **To** _____ **YRS** _____

Major (s) _____

Minor (s) _____

2. _____ City _____ State _____

From _____ **to** _____ **YRS** _____

Major (s) _____

Minors (s) _____

Graduate Schools

1. _____ City _____ State _____

Major (s) _____

Minor (s) _____

2. _____ City _____ State _____

From _____ **to** _____ **YRS** _____

Earle School District

Student Teaching Experience

School _____ City _____ State _____

From _____ to _____

Cooperating Teacher _____ Phone# _____

Employment History

Teaching Experience (List only full-time teaching assignments; last employment list)

School _____ City _____ State _____

From _____ to _____

Reason for Leaving

Grade/Subject Taught _____ **Supervisor** _____ **Phone#** _____

School _____ City _____ State _____

From _____ to _____

Reason for Leaving

Grade/Subject Taught _____ **Supervisor** _____ **Phone#** _____

School _____ City _____ State _____

Earle School District

From _____ **to** _____

Grade/Subject Taught _____ **Supervisor** _____ **Phone#** _____

Reason for Leaving

Other Work Experience:

Immediate Supervisor _____ **Company Name** _____

Company Address _____ **Phone#** _____

Duties _____

Immediate Supervisor _____ **Company Name** _____

Company Address _____ **Phone#** _____

Duties _____

Immediate Supervisor _____ **Company Name** _____

Company Address _____ **Phone#** _____

Duties _____

References: (Do not list the public school supervising teacher or the supervisor of student teaching)

Name _____ **Address** _____

Position _____ **Association** _____ **Phone#** _____

Name _____ **Address** _____

Position _____ **Association** _____ **Phone#** _____

Earle School District

Name _____ Address _____

Position _____ Association _____ Phone# _____

Applicant's Statement

Please read and sign

If employed, I agree to accept the present and future Earle School District Policies, rules, and regulations. I declare that the statements in this application are true and complete, and I authorize the school district to investigate the accuracy and completeness of the information in my application. I authorize all former employers to release to the Earle School District any information requested concerning my employment. I expressly understand that any false or misleading statement or material omission made by me in this application will be sufficient grounds for immediate dismissal from employment with the school district, whenever same is discovered.

Signature

Print

Date