

To Applicants:

Your interest in employment with Troy City Schools is appreciated.

Your attention to the following informational requirements will facilitate the processing and consideration of your application for employment. Please complete and return the official application to this office. Once completed, the application will remain on file and active for not less than three (3) calendar years from the date of application.

A complete application includes the following credentials:

Application form

Alabama certificate

College transcript(s) in an envelope sealed by the university

College placement papers for recent graduates

Reference forms (3) (**References must be on attached reference forms**)

Students in Alabama colleges should check with their School of Education concerning certification. Out-of-state applicants should write Mrs. June H. Mabry, Coordinator, State Certification Officer, State Department of Education, Gordon Persons Building Room 5201, Montgomery, Alabama 36130 to apply for certification to teach at the level or in the field for which they are applying. Alabama certification is generally required for employment as a teacher in the Troy City Schools, and the original certificate must be filed when employed.

Your application in our active file will be considered when an opening for your area of certification occurs. In most cases, only applicants with a completed application are considered for vacancies. Applicants who meet the qualifications for an existing vacancy are considered. Positions will be advertised as required. The Troy City School System is an equal opportunity employer.

Interviews are scheduled by the principal of the school and/or supervisors at the central office when a vacancy exists.

TROY CITY BOARD OF EDUCATION

P.O. Box 529 • 358 Elba Highway
Troy, Alabama 36079-0529
Phone: (334) 566-3741 • FAX: (334) 566-1425

CREENTIALS REQUIRED TO
BE CONSIDERED:

1. Alabama Certificate _____
2. College Transcript(s) _____
3. College Placement Papers _____
4. Reference Forms (3) _____

Professional Staff Application

POLICY STATEMENT EQUAL OPPORTUNITY EMPLOYMENT

It is the policy of the Troy City Schools that no person shall on the grounds of race, color, disability, sex, religion, creed, national origin, or age, be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program, activity, or employment.

(Please Print or Type Clearly)

Areas of Certification

PERSONAL DATA

Date _____

Social Security Number _____ - _____ - _____

Country of Citizenship _____

NAME _____

(LAST)

(FIRST)

(MIDDLE)

Present Address _____ Telephone _____ (_____) _____

(STREET)

(CITY)

(STATE)

(ZIP)

Permanent Address _____ Telephone _____ (_____) _____

(STREET)

(CITY)

(STATE)

(ZIP)

Permanent telephone number where applicant may
always be contacted: _____

E-Mail _____

To monitor compliance with our court ordered consent decree, we require the following information

White Non-Hispanic _____ Black Non-Hispanic _____ Hispanic _____ Asian/Pacific Islander _____

American Indian/Alaskan Native _____

POSITION DESIRED

Kind of position you are seeking: (Early Childhood, Elementary, Middle, High, Special Ed., Other)

Grade and or Subject Desired: First Choice _____

Second Choice _____

School Location Preference: (1) _____

(2) _____ (3) _____

DATE AVAILABLE FOR EMPLOYMENT: _____

07/11/02

This application will remain on file for three years (3) from the date of application.

HIGH SCHOOL GRADUATED

Name

City

State

Year Completed

LIST COLLEGES OR UNIVERSITIES:

Name	Year	Degree Granted	Area of Study

TEACHING EXPERIENCE

A. Student Teaching Experience: (Supervised Internship)

Name & Address of School	From	To	Directing Teacher	Phone

B. Teaching Under Contract: (Begin with most recent and list ALL experiences in chronological order. If more space is needed, attach additional sheet. If part-time, specify hours per day.)

Dates	Name of School	Street, City, State, Zip	Supervisor/Principal	Phone
Mo. ___ 19___ to Mo. ___ 19___ Full-Time ___ Part-Time ___	Private _____ Public _____			
Mo. ___ 19___ to Mo. ___ 19___ Full-Time ___ Part-Time ___	Private _____ Public _____			
Mo. ___ 19___ to Mo. ___ 19___ Full-Time ___ Part-Time ___	Private _____ Public _____			

CERTIFICATION

Do you have a current Alabama Teacher's Certificate? Yes _____ No _____ Number _____
Valid Until: _____ (submit copy). List state(s) from which you hold a certificate _____
(submit copies). If yes, areas of endorsement: _____. If no, have you
applied for a certificate? Yes _____ No _____ Date Applied: _____

Grades/Subjects Taught: _____ Total years taught
under contract: _____ Total years taught in Alabama: _____ Are you currently under contract? Yes _____
No _____. Will you accept a position during the school year? Yes _____ No _____. Have you ever been dismissed,
asked to resign or had your contract non-renewed? Yes _____ No _____. If yes, please explain on separate sheet.

Have you ever been convicted of a felony or any offense including moral turpitude? () Yes () No.
If yes, please explain: _____

Please note that disclosure of prior criminal history will not automatically bar employment. If this section is not truthfully completed, you may be recommended for dismissal from employment. A background check, including fingerprinting, will be required in accordance with state law.

EXTRA-CURRICULAR ACTIVITIES FOR WHICH YOU QUALIFY Indicate by each activity: (1) "H" if you qualify for Head Coach/Sponsor
(2) "A" if you qualify for Asst. Coach/Sponsor

Dept. Chairman Class Sponsor Yearbook Newspaper Debate
 Cheerleader Sponsor Football Cross-Country Softball Student Council
 Baseball Dance Team Tennis Track Golf
 Basketball Volleyball Other _____

NON-TEACHING WORK EXPERIENCES: (Begin with the most recent, list in chronological order. Include military service)

Name of Firm/Employer and Supervisor	City/State/Zip	Type of Work	Work Phone	Dates Employed

Are you legally eligible for employment in the U.S.? Yes___ No___. Are you fluent in a foreign language? Yes___ No___. If yes, list language(s):_____

Are you aware of any reasons you would not be able to perform the duties of the positions for which you are making application? Yes___ No___. If Yes, please explain:_____

PROFESSIONAL REFERENCES:

List three individuals who have first hand knowledge of your work performance (one of whom should be your current or last immediate supervisor) and have them complete the enclosed reference forms and return to the Director of Personnel.

NAME	OFFICIAL POSITION	PRESENT ADDRESS

AGREEMENT

I hereby certify that the above information is true, accurate and complete to the best of my knowledge. Any misrepresentation or willful omissions of the facts shall be sufficient cause for the disqualification of this applicant or termination of employment. Furthermore, it is understood that this application and records become the property of the Troy City School System, which reserves the right to accept or reject it. I further agree to observe all rules, regulations and policies of the district.

I hereby authorize the district to conduct work history, personal references or police record inquiries to determine my acceptability for employment. I understand I am responsible for a fee for the required background check.

Signature of Applicant

INTERVIEWED BY: (OFFICE USE ONLY)

_____	ON	_____
_____	ON	_____
_____	ON	_____
_____	ON	_____
_____	ON	_____
_____	ON	_____

Position Desired _____

TROY CITY SCHOOLS

P.O. Box 529

Troy, Alabama 36081

Phone: (334) 566-3741 • FAX: (334) 566-1425

Please Print:

Professional Reference Form

DATE _____

SOC. SEC.# _____

APPLICANT: _____
Last Name First Middle

PHONE: _____

ADDRESS: _____

City State Zip

The above named person has submitted an application for an instructional position with our school system and has given your name as a reference. Please complete the form and return to the above school system address. In advance thank you for your conscientious assessment of this applicant and for taking the time to complete this form.

I am rating this applicant in comparison to other: _____ Beginning Teachers _____ Experienced Teachers					
PLEASE RATE	Excellent	Good	Average	Below Ave.	Unknown
Professional Competence					
Maintains Professional Attitude:					
With Students					
With Faculty					
With Parents					
Teaching Effectiveness					
Classroom Management					
Shows Concern for Students					
Establishes a Good Rapport					
Creative in Presentation					
Cooperates with Peers/Administration					
Assumes Responsibility (Co-Curricular Activities)					
Use of English Language:					
Oral					
Written					
I would _____ would not _____ employ this individual in my system.					
Comments: _____					
Signature of Reference: _____ Date: _____					



ATTENTION APPLICANT (Read and Complete)

In applying for employment with the Troy City School System, I hereby give permission for inquires of reference s concerning my past performance and character. I hereby authorize parties who receive requests to give full and complete information as may be requested by the Troy City School System. I further agree that the information will not be disclosed to me, and I hereby waive any right to review this reference form.

Signature of Applicant Date

NAME OF REFERENCE: _____

POSITION: _____

ADDRESS _____
City State Zip

PHONE: _____