

PALMYRA-EAGLE AREA SCHOOL DISTRICT

123 BURR OAK STREET • P.O. BOX 901 • PALMYRA, WI 53156 • TELEPHONE 262-495-7101

TEACHER APPLICATION FORM

PERSONAL INFORMATION

NAME:	FIRST:	MIDDLE INITIAL:	LAST:
PRESENT ADDRESS:			
CITY:	STATE:		ZIP:
PHONE:	Home: ()	Other: ()	
PERMANENT ADDRESS:			
CITY:	STATE:		ZIP:
PHONE:	Home: ()	Other: ()	
SOCIAL SECURITY NO.:			

Are you 18 years or older? Yes No Are you a U.S. citizen or otherwise currently authorized to obtain lawful employment in this country? Yes No

POSITION FOR WHICH YOU ARE APPLYING:

ARE YOU CURRENTLY UNDER CONTRACT? Yes No DATE AVAILABLE SALARY EXPECTATION

Have you ever pleaded guilty to or been convicted of a misdemeanor or felony? Yes No If yes, provide further information as to the date, location of court, nature of the offense, and so forth. (The Palmyra-Eagle Area School District will consider your record only as it may substantially relate to the job for which you are applying.)

NOTE: A complete transcript of all undergraduate and graduate college work and a current license must be placed on file at the time of employment. It is the responsibility of the applicant to have this information forwarded to the District office from the applicable colleges and agencies, upon request.

EDUCATIONAL PREPARATION AND TRAINING

HIGH SCHOOL	LOCATION				
COLLEGE OR UNIVERSITY EDUCATION (Most Recent First)					
Name & Location of School	Dates Attended Mo/Yr - Mo/Yr	Degree	Grade Pt. Avg. Scale	Major(s)	Minor(s)

Number of Graduate Credits Beyond Bachelor's Degree _____ Number of Graduate Credits Beyond Masters Degree _____

PARTICIPATION IN EXTRACURRICULAR ACTIVITIES

College:

High School:

STUDENT TEACHING OR PRACTICUM EXPERIENCE

Dates - Mo/Yr From: To	District	Grade/Subject Taught

REFERENCE: _____ () _____
 (Cooperating Teacher) (School Address) Phone

Dates - Mo/Yr From: To	District	Grade/Subject Taught

REFERENCE: _____ () _____
 (Cooperating Teacher) (School Address) Phone

Dates - Mo/Yr From: To	District	Grade/Subject Taught

REFERENCE: _____ () _____
 (Cooperating Teacher) (School Address) Phone

Dates - Mo/Yr From: To	District	Grade/Subject Taught

REFERENCE: _____ () _____
 (Cooperating Teacher) (School Address) Phone

PROFESSIONAL/EDUCATIONAL EXPERIENCE

NOTE: List all professional experience. Attach an additional sheet if more space is needed for professional experience.

EXPERIENCE UNDER CONTRACT

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____ () _____
 (Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____ () _____
 (Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____ () _____
 (Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____ () _____
 (Name) (Title) (Phone)

**A copy of my teaching/education credentials may be obtained from: _____
 (College Placement Office or Agency)**

AUTHORIZATION, RELEASE, AND CERTIFICATION

I certify that all information on this application is true, complete, and correct to the best of my knowledge. I understand that any false or misleading statements or information provided by me, or material omissions of information requested of me, may result in rejection of my application or, if employed, my immediate dismissal.

I hereby give permission to the employer to seek to verify and supplement the information set forth in the application. I release from all liability or legal claims every person seeking or providing information, whether oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

I understand this application will be considered inactive after sixty (60) days.

I certify I have read and understand this authorization, release, and certification.

Dated: _____

Applicant's Signature _____

The Palmyra-Eagle Area School District is an equal opportunity employer and does not discriminate on the basis of race, national origin, religion, age, sex, handicap or disability or other basis prohibited by applicable local, state or federal fair employment laws or regulations. Applicants with a disability may request accommodations needed in the application and/or interview process.

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**PROFESSIONAL/EDUCATIONAL EXPERIENCE
ADDENDUM TO TEACHER APPLICATION FORM OF _____**

EXPERIENCE UNDER CONTRACT

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)

Dates Mo/Yr From To	District	Grade Level or Subject	Position	Reason for Leaving

REFERENCE: _____
(Name) (Title) (Phone)