

210 Alford St., Flippin, AR 72634 (870) 453-2270

AR Teacher's License: Area/s of Certification:	Yes	No

Date: \_\_\_\_\_

	APPLICATION FOR EMPLOYMENT -	CERTIFIED	
POSITION	N DESIRED:		
NAME:			
ADDRESS	S:		
	(Street & Mailing)		
	(City, State, Zip)		
PHONE: _	SOCIAL SEC	SOCIAL SECURITY #:	
<u>EDUCATI</u>	Name & Location of School	Did you graduate?	
High Sch	ool		
College_			
College_			
Other			
PERSON/	AL REFERENCES: (Superintendents, Principals, Co-workers, etc, character, personality, professionalism, work	who have first-hand knowledge of your ethic, and abilities.)	
<u>Name</u>	Address & Phone #	Occupation	
<u>EMPLOYI</u>	MENT:		
From-To <u>Yr. – Yr</u> .	Name & Address of Employer Job D	Description Reason for Leaving	

ADDITIONAL INFORMATION: (If you answer "YES" to any of the following	g, explain on another sheet of paper)						
Have you ever been convicted of a felony? YES NO							
Are you currently on the child maltreatment registry? YES_ NO	)						
Have you ever been convicted of an act of violence, including domestic violence? YES NO  Have you ever been convicted of a sex-related offense? YES NO  Is disciplinary action currently pending against your teaching license? YES NO  Has your license ever been sanctioned by the State Board? YES NO							
				Are you a Veteran or an unmarried spouse of a deceased veteran? YES NO			
				Are you a Disable Veteran? YES NO			
				Reason for leaving your current or last position?			
List any reasons known to you why you might be unable to perform coi job duties:	nsistently and promptly any of the						
ALP- Have you ever been or currently on an ALP? YES NO							
If yes, when	Subject						
It is my understanding that the Flippin School District will make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by the school district and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired may subject me to immediate dismissal.							
I further understand that this is only an <u>application</u> for employme contract is being offered.	ent and that <u>no</u> employment						
Printed Name:							
Signature:	Date:						

Note:

You may include a cover letter, resume, and letters of recommendation. You may also include a copy of your transcripts; official transcripts will only be required if hired. Applications are kept on file for two years unless you make a request for extension. Page 2 of 2

Flippin School District is in compliance with Civil Rights Responsibilities as stated in Title VI, Section 601 of the Civil Rights Act of 1964; Title IX, Section 901, of the Education Amendment of 1972; and Section 504 of the Rehabilitation Act of 1973.