

Educational Background:

High School: _____
Name Address

Technical
Schools: _____
Name Address Phone

College or University
Undergraduate: _____

Address Degree Graduation Date

College or University
Undergraduate: _____

Address Degree Graduation Date

University
Graduate: _____

Address Degree Graduation Date

University
Graduate: _____

Address Degree Graduation Date

Licensure/Certifications

Please list all Teaching licensure with expiration date and supply a photo copy with the submission of this application. List all applicable professional certifications. If you have an out of state license, please submit a copy and check with the Indiana Professional Standards Board, Indianapolis, Indiana on the validity of the license with Indiana and how to obtain an Indiana license.

Indiana Certificate
Title and Area: _____

Effective Date: _____ Expiration Date: _____

Certificate # _____ Grade Level: _____

Subject(s): _____

Life: _____ Provisional: _____ Professional: _____

Questions:

1. Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer? Yes ____ No ____
2. Have you ever been reprimanded, disciplined, discharged, or asked to resign from a prior position? Yes ____ No ____
3. Have you ever resigned from a prior position without being asked, but under circumstances involving your employer's investigation of sexual conduct with another person, mishandling of funds, or criminal conduct? Yes ____ No ____
4. Have you ever been charged with, pleaded guilty or "no contest" to, or been convicted of, any crime involving sexual abuse of any person or any other crime or moral turpitude? Yes ____ No ____
5. Have you ever been convicted of misdemeanor and/ or felony, or ever entered a plea of guilty or a plea of "no contest", or has any court ever deferred further proceedings without entering a finding of guilty or placed you on probation for a crime? Yes ____ No ____

Statement of Understanding

I certify that the information I have given on this application is true and complete to the best of my knowledge, and I understand and agree that any false information or the omission of any information shall be considered as sufficient cause for my discharge.

I hereby consent to and authorize representatives of Southeastern Career Center to investigate my employment history and personal references and to make any other investigations deemed necessary in connection with this application.

Exceptions or comments to this Statement of Understanding:

Applicant's signature: _____

Date: _____

TEACHER APPLICATION QUESTIONS

(Please complete the following questions on a separate sheet of paper. All questions should be completed using Microsoft Word.)

1. Why do you want to teach?
2. What do you remember about your favorite teacher?
3. Define three traits that you believe makes a good teacher.
4. How will you go about deciding what it is that should be taught in your classes?
5. How good are your computer skills and list what you are capable of with a computer?
6. How do you go about finding the strengths and weaknesses of your students?
7. How will you manage your students and deal with class discipline?
8. Provide a brief autobiography about yourself and do not exceed one page.