

(To Be Completed By Personnel Staff) 	Appl. Ackn.	Ref. & Cred. on File Ref. & Cred. Request	Inter. Schedld.	Inter. Complted.	Inter. Code
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Roland Public Schools I-5
 300 RANGER BLVD.
 Roland, OK 74954

"AN EQUAL OPPORTUNITY EMPLOYER"

PROFESSIONAL EMPLOYMENT APPLICATION

PERSONAL DATA (Please Type or Print in Blue or Black Ink).

NAME

LAST NAME	FIRST NAME	MIDDLE NAME
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PRESENT ADDRESS

NO. & STREET	CITY	STATE	ZIP	TELEPHONE (A.C.)
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ADDRESS WHERE YOU CAN ALWAYS BE REACHED

NO. & STREET	CITY	STATE	ZIP	TELEPHONE (A.C.)
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MILITARY STATUS	VETERAN Yes <input type="checkbox"/> No <input type="checkbox"/>	ARMY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> MARINES <input type="checkbox"/> NAVY <input type="checkbox"/> COAST GUARD <input type="checkbox"/>	ACTIVE DUTY FROM / /
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POSITION FOR WHICH APPLYING (Please list subjects, grades in order of preference)

Elementary School (Grades K-6)	Grades (List at least three)	Secondary School (Grades 9-12)	Subjects (List only those for which certified)
Middle School (Grades 7-8)	Subjects (List only those for which certified)	Other	Administrative, School Psychologist, school nurse, dental hygienist, etc.

Complete the following questions.

1. Are you currently under contract? Yes No
Where? _____
2. Do you possess a valid Oklahoma Teaching License/Certificate? Yes No
(Attach a copy if 'yes'. If 'no', have you applied? _____)
3. Have you previously applied with this district? Yes No
4. When are you available to start? / /
Mo. Day Year
5. Are you currently certified in another state(s)? Yes No
Where? _____ Type? _____ Subject or Grades? _____

PLEASE NOTE: Your application will be retained in our active file (1) year from the date completed unless a written request is filed for retention beyond that date. We will need to be notified of any changes on the application throughout the year.

(To Be Completed By Personnel Staff) 	Credentials	Transcript	W-4	Certificate	Insurance	Out of State Experience Verify
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Example B, Page 2

EDUCATIONAL BACKGROUND		ATTENDED		Degree Received	Date
NAME	LOCATION	From	To		
High School	City and State				
College or University (undergraduate)	City and State				
College or University (graduate study)	City and State				
Other	City and State				
Other	City and State				
Major Area (undergraduate)	Minor Area Undergraduate	Major Area (graduate)		Minor Area (graduate)	

TEACHING EXPERIENCE (Place student teaching on first line). Attach additional page if necessary.

School and System	City and State	Grade(s) or Subject(s)	From		To	
			Month	Year	Month	Year

RELATED WORK EXPERIENCE (List only positions directly related to teaching, teaching area, or youth work.)

Employer	City and State	Position	From		To	
			Month	Year	Month	Year

PROFESSIONAL REFERENCES (List only those persons who are qualified to evaluate your qualifications for positions sought. Include principals/superintendents of systems where experience was gained.)

NAME	TITLE	COLLEGE, SCHOOL, AND SCHOOL SYSTEM	ADDRESS-STREET, CITY, STATE, ZIP	PHONE
Cooperating Teacher				
College Advisor				
Other				
Other				
Other				
Other				