

EDUCATION

Include high school, college, and graduate work in order taken:

<u>School</u>	<u>Date of Attendance</u>	<u>Semester Hrs.</u>	<u>Major</u>	<u>Degree</u>

EXPERIENCE

<u>Name of School</u>	<u>Location</u>	<u>Dates</u>	<u>Number Years</u>	<u>Position</u>

PROFESSIONAL REFERENCES

<u>Name</u>	<u>Address & Phone</u>	<u>Position</u>

APPLICANT STATEMENT

I certify that all statements made in this application are true and complete, and that any misstatements of material facts will subject me to disqualification or dismissal. In submitting this application for employment, I authorize investigation of all statements contained therein. I authorize any person, organization, or educational institution attended as stated or otherwise, to furnish the Claiborne County Board of Education any information they have concerning me, whether on record or not, and I hereby release all persons, organizations, and institutions from claims for damages by reason of furnishing such information.

I recognize that, if I am employed, the Director of Schools will assign or reassign me to a specific position as the need requires.

I hereby certify that I (___ have ___ have not) been convicted of a misdemeanor or a felony in any state of the United States. (If "have" is indicated, explain fully the details of each such conviction on a separate sheet of paper)

I further certify that I (___ have ___ have not) been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence, or insubordination as the same are defined in Section 49 – 5 – 501 of the Tennessee Code. (If "have" is indicated, explain fully the details of each such conviction on a separate sheet of paper. The employer's non-renewal of a yearly contract need not be indicated unless the non-renewal was for cause as listed above).

I understand that misrepresentation of any these certifications may subject me to the penalties prescribed in Section 49 – 5 – 406 of the Tennessee Code.

Legal Name (printed): _____

Applicant Signature: _____ Date: _____

Official employment contingent upon acceptable TBI/FBI background check.

---FOR OFFICE USE ONLY---			
Required Documents	YES	NO	References Checked By _____
Background Check Clear	YES	NO	Date of Background Clearance _____
Interview Date	_____		
Interviewed By	_____		Hire Date _____
Position	_____		School _____