



INSTRUCTIONS:

- Complete and return this application (REQUIRED).
- Provide resume and letter of application (REQUIRED).

APPLICATION FOR EMPLOYMENT

(Office Use Only)

Date Received: _____

PLEASE PRINT OR TYPE ALL SECTIONS

It is the responsibility of the applicant to communicate all relevant information concerning the applicant's qualifications.

PERSONAL	Last Name:		First:	Middle:	Maiden:
	Present Address:			Home Phone: () -	Other: () -
	City:	State:	Zip Code:	Social Security Number:	
	Title of Position Applying For:				
	Type of Position Applying For: <input type="checkbox"/> Professional <input type="checkbox"/> Service Personnel				
	Have you ever been employed with Fred W. Eberle Technical Center? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain. Where? When?				Other name(s) on records:
	Are you under contract to another agency or employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain.				
	Have you ever been dismissed or asked to resign from any employment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enclose full explanation.				
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No					

EDUCATION	What is your highest level of education attained?																					
	<input type="checkbox"/> High School Diploma <input type="checkbox"/> GED <input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelor's Degree (AB/BA/BS) <input type="checkbox"/> Bachelor's+15 add. semester hrs. <input type="checkbox"/> Master's Degree (MA/MS) <input type="checkbox"/> Master's+15 add. sem. hrs. <input type="checkbox"/> Master's+30 add. sem. hrs. <input type="checkbox"/> Master's+45 add. sem. hrs. <input type="checkbox"/> Doctorate																					
	Do you hold a valid West Virginia Teaching Certificate or any other license or certification? <input type="checkbox"/> Yes <input type="checkbox"/> No Year and Type:																					
	Do you hold a valid Teaching Certificate or any other license or certification in another state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, identify state(s), Years and Type:																					
	Has your teaching license ever been denied, suspended, or revoked following allegations of misconduct? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enclose full explanation and documentation.																					
	<table border="1"> <thead> <tr> <th>High School(s) Attended</th> <th>Name and Address of Institution:</th> <th>Dates</th> <th colspan="2">Diploma</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td colspan="2"><input type="checkbox"/> Yes - No <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td></td> <td colspan="2"><input type="checkbox"/> Yes - No <input type="checkbox"/></td> </tr> </tbody> </table>					High School(s) Attended	Name and Address of Institution:	Dates	Diploma					<input type="checkbox"/> Yes - No <input type="checkbox"/>					<input type="checkbox"/> Yes - No <input type="checkbox"/>			
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Beginning with your current/last position, list in chronological order your work experience. (Attach additional pages if needed.)					
WORK EXPERIENCE	Position/Title	Address/Location	Dates	Supervisor Name	Phone
					() -
					() -
					() -
					() -
					() -
					() -
					() -

REFERENCES	Name/Position or Title	Mailing Address	Phone
			() -
			() -
			() -
			() -

A criminal record check by fingerprinting is required for employment by Fred W. Eberle Technical Center. Failure to truthfully answer these application questions will result in denial of employment.

If you answer yes to any question below, SUBMIT a narrative with your application. The narrative should include dates, locations, school systems, and all/any other information that explains the circumstance(s) in detail.

BACKGROUND CHECK	1. Have you ever had adverse action taken against any application, certificate, or license in any state? Adverse action includes but is not limited to the following: letter of warning, reprimand, denial, suspension, revocation, voluntary surrender or cancellation.	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	2. Have you ever been disciplined, reprimanded, suspended, or discharged from any employment because of allegations of misconduct?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	3. Have you ever resigned, entered into a settlement agreement, or otherwise left employment as a result of alleged misconduct?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	4. Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	5. Have you ever been arrested, charged with, convicted of, or are currently under indictment for a felony?*	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	6. Have you ever been arrested, charged with or convicted of a misdemeanor? (For the purpose of this application, minor traffic violations should not be reported.) Charges or convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI) must be reported.*	<input type="checkbox"/> Yes	<input type="checkbox"/> No

* For a YES response to items 5 & 6, the following must be included for all charges, including those that have been dismissed or expunged: 1) Judgment Order; OR 2) Final Order; OR 3) Magistrate Court Documentation; AND 4) all other relevant court documentation.

NOTE: An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.

SIGNATURE	The information provided in this application for employment is true, correct, and complete.
	I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation, and I consent to the release of information concerning my capacity and fitness by employers, educational institutions, law enforcement agencies and other individuals and agencies. I understand that if I am employed, any misstatement or omission of fact on this application may result in my dismissal.
Date: _____	Applicant Name: _____

Fred W. Eberle Technical Center is an equal opportunity employer and applicants for employment are considered solely on the basis of individual qualification and merit without regard to age, gender, race, color, religion, disability, or national origin.