

PERSONNEL
P.O. BOX 546
Hopkins Park, IL 60944

Name: _

Telephone: (815) 944-5448 Fax: (815) 944-6750

PROFESSIONAL EMPLOYMENT APPLICATION

Applicant Note: This application form is intended for use in evaluating your qualifications for employment. Please answer all questions completely and accurately. False or misleading statements on this form or during an interview will result in the termination of the application process or if discovered after employment will be grounds for termination of employment. PLEASE DO NOT WRITE "SEE RESUME".

Date of Application:		Soci	al Security Number:		
Present Address:					
Permanent Address:					
Present Telephone N	Tumber: ()		Permanent Telep	hone Number: ()	
Have you previously	filed an application	with this school systen	n?	\square No	
If yes, under what na	ame?			Date:	
Teachers Only:					
Are you currently u	nder contract?	If yes, w	here?	Date of Expirati	on:
When will you be av	ailable for assignmer	nt in our system?			
POSITION	DESIRED				
Elementar	y Teacher	Grades in order of p	reference		
Middle Sc	hool Teacher				
Administra	ator and/or Teacher	Title of Position Soug	ght		
Professions	al Support Staff	Title of Position Soug	ght		
EDUCATIO	(List below any sch	nool, college or university you	ı have attended. Begin with	high school and list in chronologic	al order.)
Name of High Schoo	l			☐ Diploma	□ GED
College/University/ Trade School	Location	Dates Attended From To	Major/Program	Subjects with 18 or more semester hours	Degree/ Certificate
		•	•	1	•

Dates	Employer and Address	Telepho	ne Number	Supervisor	Position Held
From To					
UDENT	TEACHING (TEAC	HER APPLICAN	TS ONLY		
Dates From To	School and Location (Include address and phone number)	Subject Coopera		ting Teacher nd Address	Supervising Teacher Name and Addres

REFERENCES

List three (3) persons, *NOT RELATED TO YOU*, who know you <u>professionally</u>. **Beginning teachers:** References must include your student teacher supervisor and cooperating teacher. **Experienced Teachers and Educational Administrator Applicants:** References must include most recent immediate supervisor. Professional references include people who know you through schools and universities, business associations, former employers, etc. **Reference forms must be mailed to Personnel in a sealed envelope by the person completing the reference.**

Name	Address	Telephone	Official Position

						e sheet.
1.	Have you ever been convi	cted of any of the following violation	ons?	Yes		No
	A misdemeanor (other tha	an minor traffic violation)?		Yes		No
	A felony?			Yes		No
	Any offense involving mor	ral turpitude?		☐ Yes		No
2.	Have you ever had a teach	ing certificate or other professiona	l certificate revoked/suspended in any state?	Yes		No
3.	Have you ever been involu discharged from the Ar		on or received other than an honorable	Yes		No
4.	Have you ever received	any formal disciplinary action	from any supervisor?	☐ Yes		No
5.			y did you leave your last position?			
6.			nmunity Consolidated School District #2			
7.			you consider pertinent to your application	·		
8.	ESL, At-Risk, and/or A	Alternative programs.	List your experiences working with stud			
9.			he Pembroke Community Consolidated			
	List the name of per	sons we may contact in the ev	vent we are unable to reach you at you	r phone or a	ddres	s.
			Telephone			
	Name	Address	Telephone	Rela	tionsh	ip
	Name	Address	Telephone	Rela	tionsh	ip
_	Name	Address	Terephone	Rela	tionsh	ip
	Name	Address	Terephone	Rela	tionsh	ip
CE	Name ERTIFICATIO		Telephone	Rela	tionsh	ip
	RTIFICATIO	ON				
		ON	ned			ip

List any teaching licenses yo	List any teaching licenses you have held. (Include those licenses you are eligible to receive).							
STATE	TYPE OF LICENSE	EXPIRATION DATE	ENDORSEMENTS					
Do you have National Board (Certification: (If ves, attach s	cores)	\square No					
PROFESSIONAL This section must be completed in		AL ACTIVITIES						
Describe in 150-300 words training/experience will be an		dministration/other as your profe	ession and explain why your					
NOTE TO APPLI	CANT							
NOTE TO APPL	CANI							
		onded. Ices or have your college career placeme	nt credentials sent to Personnel.					
employment history. I further at the Pembroke School District wit	uthorize any former employer, pe th information regarding my perf	ct #259 to conduct an investigation of peerson, firm, corporation, educational ins formance, character and general reputat lity as a result of furnishing this informa	titution, or government to provide ion. I discharge the Pembroke					
I understand that any offer of en outcome of a criminal records ch	nployment is contingent upon a contect. I further understand that th	ompleted Application File, School Board ne criminal records check is conducted a	approval and an acceptable t my expense.					
I certify, to the best of my knowle this application constitutes groun		n this application is true. I understand (that falsification of information on					
Print Name	 Signature	2						

The Pembroke Community Consolidated School District #259 does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, marital status, or sexual orientation, in any of its employment practices, educational programs, services or activities. For additional information, contact Personnel at (815) 944-5448.



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CONFIDENTIAL REFERENCE FORM

		TO BE	COMPLETED BY A	PPLICANT		
Na	me:LAST	FIRST	MIDDLE/MAIDEN	Social Secur	ity Number _	
Ιh	ave applied with the Pe	embroke School Dis	trict, Hopkins Park, IL for the	following position(s)		
hol eva	d harmless my former fi	om any action or lia this information on a	District with information regarding bility for any information provid confidential basis to the Pembrol	led or statement made	in good faith.	I understand the
Sig	nature			Date		
	TO B	E COMPLET	ED BY PERSON PRO	OVIDING REFI	ERENCE	
1.	How long have you ki	nown the applicant?	? (Give dates if possible)			
2.	What was the applica	nt's position?				
3.	What were the dates	of employment?				_
4.	What was the applica	nt's reason for leav	ing?			_
5.	Did the applicant reco	eive any disciplinar	y action or reprimand?	Yes	No	Not Known
6.	Was the applicant asl	ked to resign?		Yes	No	Not Known
7.	If a vacancy existed employment?	•	ness for which the applicant	was qualified, would	you recommo	end him/her for
8.	Other Comments? _					
				Phone Numb	er	
Sig	gnature			Date		

Name of Applicant						
Please check the appropriate column rating	POOR	BELOW	AVERAGE	ABOVE	EXCELLENT	NOT
COMPLETE ON ALL APPLICANTS		AVERAGE		AVERAGE		OBSERVED
Personality –Shows those qualities that make						
teaching/working forceful and effective such as: A						
pleasant, cheerful disposition, enthusiasm and an						
appealing manner with others.						
Personal Appearance -Shows the type of grooming which						
reflects neatness, attentiveness and appropriateness of						
attire.						
Physical Health -Has posture and bearing which gives						
evidence of energy and vitality in daily responsibilities.						
Emotional Stability –Has control of emotions which results in a general moderateness.						
Initiative –Has the quality of seeing what needs to be done						
and is judicious in doing it with or without directions.						
Leadership -Has experience in collaborative planning and						
decision-making.						
Ability to Work with Others -Has a cooperative and open-						
minded attitude in working with others in the solution of						
mutual problems. Respects the opinions, ability and						
contributions of others.						
Reliability –Is consistent, dependable and accurate in carrying responsibilities to a successful conclusion.						
Community Relationships —Has ability to meet						
community/school situations with poise, understanding						
and tact resulting in friendly relationships.						
Professional Growth -Is willing to examine his/her						
teaching//working effectiveness and constantly seeks better						
procedures.						
Demonstrates Standards and Performance Indicators -Uses						
accurate up-to-date information, establishes relationships						
among facts, concepts, principles, skills, uses multiple presentations and explanations and responds accurately to						
student questions.						
Manages –Begins promptly, discourages or redirects						
digressions, follows planned sequence of activities with						
minimum digressions and makes effective use of time.						
Manages Student Behavior -Establishes classroom, school						
rules and procedures, monitors student adherence to rules						
and procedures and stops inappropriate behavior using						
reasonable sanctions.						
Ability to Stimulate Learning —Maintains a learning environment which stimulates the maximum growth of						
individual students and teachers.						
Experience/Skills –Has experience/skills in environment						
with students in the regular classroom setting with a wide						
range of abilities (ESL, At-Risk and Special Education						
students).						
Sympathetic Understanding of Children -Shows a sincere						
interest in children and in the solution of their problems.						
Instructional Strategies –Uses a variety of instructional strategies, including the use of technology when						
appropriate.						
Uses Assessment Results -Uses assessment data to						
determine achievement of objectives, to modify objectives,						
content and instructional strategies and to report progress						
to students, parents and the school community.						
Complete Job Requirements According to Timeliness -						
Completes school reports, attendance reports, grade						
reports, etc. on schedule.			1			
Professional Attitudes - Participates in activities which improve the status of the profession as a whole and of						
individual teachers.						
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hold harmless evaluator will	my former fro	om any action or liab nis information on a	District with information regard bility for any information proving confidential basis to the Pembr	ided or statement made	in good faith.	I understand the
Signature				Date		
	TO BE	COMPLETE	ED BY PERSON PRO	OVIDING REFI	ERENCE	
9. How long	g have you kno	own the applicant?	(Give dates if possible)			
10. What wa	s the applican	nt's position?				
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		n your school/busir	ness for which the applicant	was qualified, would	you recomm	end him/her for
16. Other Co	omments?					
				Phone Numb	er	
Signature				Date		

Name of Applicant						
Please check the appropriate column rating	POOR	BELOW	AVERAGE	ABOVE	EXCELLENT	NOT
COMPLETE ON ALL APPLICANTS		AVERAGE		AVERAGE		OBSERVED
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reports, etc. on schedule.						
Professional Attitudes – Participates in activities which						
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individual teachers.						

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Fax:



PERSONNEL 4120 South Wheeler Road Hopkins Park, IL 60944 Telephone: (815) 944-5448 (815) 944-6750

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Sign	nature			Date		
	TO B	E COMPLETI	ED BY PERSON PRO	OVIDING REFI	ERENCE	
			? (Give dates if possible)			
			ing?			
				Yes		
	Was the applicant as	Q		Yes		
23.	If a vacancy existed employment?	-	ness for which the applicant	was qualified, would	you recomme	end him/her for
24.	Other Comments? _					
Nai	me			Position		_
Sch	nool/Agency/Name			Phone Numb	oer	
Ad	dress					
Sig	nature			Date		

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