

# Snyder Public Schools

Office of the Superintendent---- Personnel

P. O. Box 368

SNYDER, OKLAHOMA 73566

Date \_\_\_\_\_

## Application for Certified Position

Application for \_\_\_\_\_

### A. IDENTIFICATION

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Social Security No.

Present Address:      Temporary Until \_\_\_\_\_  
\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Street                                      City                                      State                                      Zip

Permanent Address:      \_\_\_\_\_  
\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Street                                      City                                      State                                      Zip

### B. EMPLOYMENT PREFERENCE

#### 1. Type of Application:

a. Fulltime Employment Only \_\_\_\_\_                      b. Temporary/Part-time/Half-time \_\_\_\_\_

c. Either (a or b) \_\_\_\_\_

#### 2. Kind of Employment (Check only those areas for which you can qualify and in which you would accept employment.)

a. Elementary Teacher (Pre-K – 5) \_\_\_\_\_                      b. Middle School Teacher (6-8) \_\_\_\_\_

c. Secondary Teacher (K-12) \_\_\_\_\_                      d. Professional School Service Employee  
(Administrator, Counselor, Librarian,  
Nurse, etc.) Other \_\_\_\_\_

#### 3. Elementary Applicants:

List grade level preference: A. \_\_\_\_\_ B. \_\_\_\_\_ C. \_\_\_\_\_ D. \_\_\_\_\_

List other subjects you are qualified to teach:

A. \_\_\_\_\_ B. \_\_\_\_\_ C. \_\_\_\_\_

#### 4. Middle School/Secondary Applicants:

a. Major teaching field \_\_\_\_\_ Number of hours in major \_\_\_\_\_

List subjects you are qualified to teach in you major:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

b. Minor teaching field \_\_\_\_\_

List subjects you are qualified to teach in your minor:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

c. List other academic or extra-curricular activities you qualified to teach or supervise.  
(Include sports, clubs, etc.):

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_ 5. \_\_\_\_\_

5. Can you speak a language other than English? \_\_\_\_\_. If yes, please indicate the language spoken. \_\_\_\_\_

**C. EDUCATIONAL PREPARATION**

	Kind of Degree	Date of Graduation	Name of Institution	Location
1. Undergraduate				
2. Graduate				
3. Other				

**ENCLOSE COMPLETE TRANSCRIPTS WITH THIS APPLICATION AND HAVE COLLEGE PLACEMENT FOLDER SENT TO US.**

**Bachelor's Degree** College Major \_\_\_\_\_ No. of Hrs. \_\_\_\_\_ GPA in Major \_\_\_\_\_  
 Competency Exam Passed Yes \_\_\_\_\_ No \_\_\_\_\_  
 College Minor \_\_\_\_\_ No. of Hrs. \_\_\_\_\_ Overall GPA \_\_\_\_\_  
 Competency Exam Passed Yes \_\_\_\_\_ No \_\_\_\_\_

**Master's Degree** College Major \_\_\_\_\_ No. of Hrs. \_\_\_\_\_ Overall GPA \_\_\_\_\_  
 Competency Exam Passed Yes \_\_\_\_\_ No \_\_\_\_\_

**Student Teaching:** a. Completed \_\_\_\_\_ b. Taking now \_\_\_\_\_ C. None \_\_\_\_\_

**If you have completed student teaching within the last 3 years, please complete the following:**

Name of Cooperating Teacher \_\_\_\_\_  
 School \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
 Grade and Subjects taught \_\_\_\_\_ Date completed \_\_\_\_\_

**D. PREVIOUS EXPERIENCE**

- Total years experience as a contracted teacher in an accredited school \_\_\_\_\_
- List below a complete chronological history of professional experience. Include supplementary sheet if space is inadequate. Begin with the most recent experience.

	Name of School and District	Street, City, State, Zip	Assignment	Dates	
				From	To
a.					
b.					
c.					
d.					

**3. Experience to be evaluated for salary purposes must be validated by the employers listed above. State law, limits transfer of out of state teaching credit to five years.**

**E. PERSONAL DATA**

1. Have you ever been convicted of a felony?

No \_\_\_\_\_ Yes \_\_\_\_\_ (Explain) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

We would appreciate a recent photograph of you for our files, if you desire to submit one. It is very helpful for us to more vividly recall you when reviewing the many applications we receive.

Please attach here.

2. What type of Oklahoma certificate do you hold? (Certificate is responsibility of applicant.)

Standard \_\_\_\_\_ Provisional \_\_\_\_\_ Temporary \_\_\_\_\_

Certificate Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

3. If you do not have Oklahoma certification, describe any out of state certification you hold. \_\_\_\_\_

\_\_\_\_\_

4. Are you currently employed or under contract? \_\_\_\_\_

Present salary? \_\_\_\_\_ Expected salary? \_\_\_\_\_

5. Date available for employment? \_\_\_\_\_

6. Have you ever failed to be re-employed? \_\_\_\_\_ Where? \_\_\_\_\_

If so, state reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Do you have a relative who is a member of the Snyder Board of Education or who is employed by the

Snyder Schools? Yes \_\_\_\_\_ No \_\_\_\_\_ Explain \_\_\_\_\_

\_\_\_\_\_

**F. REFERENCES (Do not include relatives)**

Three references are required. In naming references, give preference to supervisors, principals, and other educators who are familiar with your professional work. Information for each reference must be complete.

Name	Street, City, State, Zip	Phone Number	Position
1.			
2.			
3.			

1. How do you feel about working with handicapped students that may be mainstreamed into your classroom?

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**G. NOTICE TO APPLICANT**

The applicant should exercise the greatest care in preparing the application. Please do not omit any item. Information given herein becomes a legal part of the contract in case of selection. False information given will be grounds for dismissal.

Updating applications is the responsibility of the applicant. This application will serve as your request to add your name to our list of applicants. The acceptance of an application is not a promise of employment. All applicants must apply directly to the Superintendent and not to the individual schools.

I understand that my application will remain active from September 1 through August 31 of the school year in which the application is made and that I should notify the office of the Superintendent, in writing, if I wish to be considered beyond that period. All persons, firms, and entities listed in this application are hereby authorized to release any information or records concerning me to the personnel department of the Snyder Public Schools and I hereby release said persons, firms, and entities from any liability as a result of the furnishing of such records and information.

I certify to the best of my knowledge the facts set forth in my application are accurate and complete.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_