

# Lake Linden-Hubbell Public Schools

## TEACHER APPLICATION

Elementary \_\_\_\_\_  
Middle School \_\_\_\_\_  
High School \_\_\_\_\_  
Part-Time \_\_\_\_\_  
Special Educ \_\_\_\_\_

Date of Application \_\_\_\_\_

Name in Full \_\_\_\_\_ Are you 18 years of age or older? \_\_\_\_\_

Home Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip Area Code

Present Address \_\_\_\_\_ Phone \_\_\_\_\_  
Street City State Zip Area Code

How long do you expect to live in this area? \_\_\_\_\_ Social Security No. \_\_\_\_\_

Are you a citizen of the United States? \_\_\_\_\_ If not, do you intend to become a U.S. citizen? \_\_\_\_\_

When would you be able to commence work? \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Are you presently under arrest for a pending felony charge? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Have you previously filed an application for a position with this district? \_\_\_\_\_ When? \_\_\_\_\_

If related to anyone in our employ (other than spouse), state name and department \_\_\_\_\_

### EDUCATION

Name / Location of School	Years Attended	Date Graduated	Degrees Received	Major / Minor
High School _____				
College _____				
College _____				
Other _____				

**CERTIFICATION AND LICENSING**

What Certificate do you hold to teach in the Public Schools of this State? \_\_\_\_\_

Date Certificate Issued \_\_\_\_\_ Date Certificate Expires \_\_\_\_\_

Name under which Certificate was granted \_\_\_\_\_

Subjects or areas you are certified and licensed to teach in Michigan \_\_\_\_\_

State grade preferred if applicant for early or later elementary teaching \_\_\_\_\_

State grade preferred if applicant for middle or high school teaching \_\_\_\_\_

Do you speak a second language? \_\_\_\_\_ If so, please indicate \_\_\_\_\_

**WORK HISTORY**

Are you presently under contract? \_\_\_\_\_ If yes, when does it expire? \_\_\_\_\_

What present position do you hold and what subjects are you now teaching? \_\_\_\_\_

Present Salary \_\_\_\_\_ Salary Expected \_\_\_\_\_

Employer Name / Address	Phone No.	From	To	Type of Work	Reason for Leaving
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Have you ever been denied tenure, dismissed, asked to resign or refused re-employment as a teacher? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Why do you wish a change of location? \_\_\_\_\_

**U.S. MILITARY EXPERIENCE**

Branch of Service	Rank / Position	Dates of Service	Years
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**EXPERIENCE WORKING WITH YOUTHS**

List experience you have had working with youths of school age, such as summer camp, counseling, etc.

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List in order of preference the subjects you are qualified to teach \_\_\_\_\_

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What Co-curricular activities are you qualified and willing to coach? \_\_\_\_\_

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List any extracurricular activities you participated in during college \_\_\_\_\_

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**REFERENCES** (Work experience, academic, personal. Do not name relatives.)

Name	Address	Phone No.
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What further information would assist the evaluation of your candidacy? \_\_\_\_\_

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**Optional:** Do you have any medical, mental or physical conditions which need to be considered should you be employed by this district?      \_\_\_\_\_ Yes      \_\_\_\_\_ No

- REQUIREMENTS:**
1. Physical Examination
  2. Criminal records check, required as per State Law

I hereby authorize the investigation of all statements contained in this application. Permission is given to contact references and employers. I understand that this application will become part of my permanent file and that any misrepresentation, misleading or untruthful statement or omission is cause for dismissal.

Date \_\_\_\_\_ Signature \_\_\_\_\_

**PLEASE READ**

Before final consideration for employment, applicant must have on file in the Personnel Office a complete transcript of college credits, placement references and evidence of eligibility for certification.

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In accordance with Public Act 96 of the Public Acts of 1995, it is a criminal misdemeanor to use a suspended, surrendered, revoked, nullified, fraudulently obtained, altered or forged teaching certificate, school administrator certificate, other State Board of Education approval or a certificate or approval of another person for the purpose of obtaining employment.

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It is the policy of the Lake Linden-Hubbell Public School District that no person, on the basis of race, sex, color, religion, national origin or ancestry, age, marital status, disability, weight or height, shall be discriminated against in employment, educational programs and activities or admissions. Questions or concerns regarding the nondiscrimination policies should be directed to the Superintendent of Schools, Lake Linden-Hubbell School District, 601 Calumet Street, Lake Linden, MI 49945, telephone number (906) 296-6211.