

THOMPSON PUBLIC SCHOOLS

785 Riverside Drive
No. Grosvenordale, Connecticut 06255
(860) 923-9581
Fax (860) 923-9638

CERTIFIED EMPLOYEE APPLICATION

Applicants will be considered without regard to race, color, religion, sex, age, marital status, physical disability, or other applicable unlawful discriminatory standard.

Please complete the entire application form. (You may include a personal resume, but **not** in lieu of completing the application).

Name (Print or Type) _____
First Middle Last Social Security Number

Present Address _____
Street City State Zip Code Telephone Number

Permanent Address _____
Street City State Zip Code Telephone Number

POSITION FOR WHICH YOU ARE APPLYING:

ELEMENTARY/MIDDLE TEACHER (order of preference)

CT Certification in this area?
Yes (attach copy) No

(1) _____

(2) _____

(3) _____

SECONDARY TEACHER

(list subjects you are certified to teach in order of preference)

CT Certification in this area?
Yes (attach copy) No

(1) Subject _____

(2) _____

(3) _____

SPECIAL EDUCATION TEACHER/RELATED SERVICES SPECIALIST

(list areas in order of preference)

CT Certification in this area?
Yes (attach copy) No

(1) _____

(2) _____

(3) _____

ADMINISTRATIVE OR GUIDANCE

CT Certification in this area?
Yes (attach copy) No

Note: APPLICATIONS WILL BE KEPT ACTIVE ONLY 1 YEAR FROM DATE OF FILING

Copies of certification, transcripts, and letters of reference must be submitted with this application.

I. HEALTH

It is understood that all applicants are in a state of health such that they are able to fulfill all duties and responsibilities for the position they seek.

II. PRESENT POSITION

Grade and Subject _____

School _____

Town or City _____

State _____

Present Salary _____

Work Phone _____

Date you can begin work _____

III. EDUCATIONAL PREPARATION (list in chronological order; most recent first)

College /University	Location	Specialization or Nature of Course Completed	Date Attended From	To	Degree	Date Graduated

IV. STUDENT TEACHING EXPERIENCE (if applicable)

From		To		School	Location		Grade and/or Subjects
Month	Year	Month	Year		Town/City	State	

V. EDUCATION EMPLOYMENT EXPERIENCE (list in chronological order; most recent first)

From		To		School	Location		Nature of Position State Grades, Subject	No. Months Taught	Annual Salary Rate
Month	Year	Month	Year		Town/City	State			

VI. OTHER PROFESSIONAL EXPERIENCES (study, workshops, conferences, etc.)

From		To		Nature of Experience
Month	Year	Month	Year	

VII. OTHER WORK EXPERIENCES (business, trades, summer occupations, social services, athletics, coaching, etc.)

From		To		Firm, Institution, etc.	Nature of Experience
Month	Year	Month	Year		

VIII. MILITARY SERVICE (active duty)

From		To		Branch of Service	Rank	No. of Months
Month	Year	Month	Year			

IX. ADDITIONAL INFORMATION (please sign this section in addition to signature for entire application)

- a. Have you ever been convicted of a felony or, within the last two years, a misdemeanor for which you were imprisoned?
Yes _____ No _____ If yes, please explain, in writing, the circumstances and attach the statement to this form (A conviction will not constitute an automatic bar from employment.)
- b. Has your teaching certificate ever been suspended or revoked? Yes _____ No _____ If yes, please explain, in writing, and attach the statement to this form.
- c. Have you ever been dismissed, or asked to resign, from any teaching position? Yes _____ No _____ If yes, please explain, in writing, and attach the statement to this form.
- d. Nepotism Policy: Employment of Relatives

The following shall govern conflict of interest in staff employment and the appointment of the persons described in the paragraphs below:

1. No spouse, minor child, or dependent of a board of education member shall be appointed to a long term position in this school district.
2. Persons otherwise related by blood or marriage to a board of education member may be employed following full disclosure of the relationship at a public Board meeting.
3. A spouse, minor child or dependent of aboard of education member may be employed for a limited term (fifteen or less working days) or short-term seasonal (i.e. summer custodial work) employment on a competitive basis among persons who are eligible.
4. Persons related by blood or marriage to members of the administrative staff shall not be employed, appointed, promoted, transferred, or assigned to a position that is in a direct line relationship involving supervision of that position by a related administrator.
5. No person related by blood or marriage to the Superintendent of Schools shall be appointed to any position in this school district.

This policy shall not necessitate the resignation of any employee should a family member be elected to the board of education and shall not apply to any person who has been employed by the board of education prior to the adoption of this policy.

The term "supervision" as used and applied in this policy means: the authority to recommend or approve appointment, promotion, salary, evaluation, termination, or other similar personnel actions.

The term "administrative staff" as used and applied in this policy means: principal, assistant principal, department chairperson, coordinator of special services, or business manager.

Do you violate the above Thompson Board of Education Nepotism Policy? Yes _____ No _____

_____ Applicant's Signature

_____ Date

ACTIVITIES AND INTERESTS

Briefly describe your participation in those major activities and interests which would help us assess your candidacy.

1. Notable Awards, honors, Achievements (scholastic or otherwise)

2. Publications

3. Professional Organizations

REFERENCES

Give names of those who have closely observed your work as a teacher, employee, or as a student.

Full Name (First) (Initial) (Last)	Official Position	Street	Present Address City or Town	State	Telephone Number

Date _____ Signature of Applicant _____

Return application to: Thompson Board of Education
Office of the Superintendent of Schools
785 Riverside Drive
North Grosvenordale, CT 06255

DO NOT WRITE BELOW THIS LINE

Review Of Application/Follow-up

Date	TBOE OFFICIAL	Comment