

# Application for Certificated Personnel

## North Bend Central Public Schools

An Equal Opportunity/Affirmative Action Employer

1320 Walnut Street  
 North Bend, NE 68649  
 PO Box: 160  
 Phone: (402) 652-3268  
 Fax: (402) 652-8348

*Please type or print your responses in ink.*

### I. PERSONAL & CONTACT INFORMATION

Name \_\_\_\_\_  
First Middle Last (Maiden)

Present Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
Street City State Zip

Permanent Address \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_  
(If different from present address.) Street City State Zip

Social Security Number \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ E-mail address \_\_\_\_\_

\_\_\_ Yes \_\_\_ No. Are you a former NBC Public Schools employee? Date of separation \_\_\_\_\_  
 Date available to work with NBC Public Schools \_\_\_\_\_

### II. CERTIFICATION

**CERTIFICATION--Type of certificate now held**  
 \_\_\_ None \_\_\_ Valid Nebraska teaching certificate.\* \_\_\_\_\_ Expiration date \_\_\_\_\_  
 Areas of Specialization/Endorsements \_\_\_\_\_  
 \* Attach photocopy of current teaching certificate. (Front and back)

**Activities:** Check any of the following which you would be willing to sponsor, direct, coach or manage.  
 Check B for boys and/or G for girls.

\_\_\_ Basketball  B  G \_\_\_ Cross Country  B  G \_\_\_ Football \_\_\_ Golf  B  G \_\_\_ Softball \_\_\_ Track  B  G  
 \_\_\_ Volleyball \_\_\_ Wrestling \_\_\_ Cheer/Dance \_\_\_ Class Sponsor \_\_\_ Drama \_\_\_ FBLA \_\_\_ FFA \_\_\_ FPS \_\_\_ Instrumental Music  
 \_\_\_ Math Counts \_\_\_ National Honor Society \_\_\_ NB Club \_\_\_ Quiz Bowl \_\_\_ Science Club \_\_\_ SOS (Concessions) \_\_\_ Spanish Club  
 \_\_\_ Spirit Club \_\_\_ Speech \_\_\_ Student Council \_\_\_ Unified Bowling \_\_\_ Vocal Music \_\_\_ Yearbook  
 \_\_\_ Other \_\_\_\_\_

Describe Your Experiences/Success/Qualifications for marked activities:  
 \_\_\_\_\_  
 \_\_\_\_\_

### III. PROFESSIONAL TRAINING & EXPERIENCE

#### A. HIGH SCHOOL(S) ATTENDED

	Grades Attended	Special Honors or Recognition

#### B. STUDENT TEACHING

From	To	School	Location City/State/State	Grade & Subject
<b>Cooperating Teacher:</b>				
<b>Cooperating Teacher:</b>				

**C. COLLEGE or UNIVERSITIES ATTENDED**

Name of Institution (City, State)	Major	Hrs	Minor	Hrs	Year Graduated	Degree	GPA (4.0 scale) & Special Honors or Recognition

**D. EDUCATIONAL WORK EXPERIENCE—Include at least the last five employers**

Years Taught	Subject Taught & Extracurricular Duties	School	Reason for Leaving

**IV. REFERENCES**

List names and addresses of persons who are qualified to answer questions concerning your fitness for the position you seek. Include especially supervisors, principals and superintendents under whom you have taught in the past 15 years. If you have not taught previously, include the names of cooperating teachers, college or university supervisors and building principals who have been associated with your student teaching. Indicate with an (\*) any reference which is included in your credentials.

Name	Position	Contact Info: Telephone & Complete Mailing Address

**NOTE:** Please include or have references sent. Be certain that they are up to date. It is important to include evaluations from principals, superintendents, or supervisors under whom you have taught or worked.

**V. VETERAN PREFERENCE**

If you wish to be considered for a Veterans Preference please indicate \_\_\_ Yes \_\_\_ No, and submit the appropriate documentation with your application. Note: This section is optional; you need to request a Veterans Preference even if you are eligible, and if you do not request the preference, you need not submit information about your veteran status.

1. Applicant Veteran? \_\_\_ Yes \_\_\_ No. If yes, submit DD Form 214.
2. Disabled Veteran? \_\_\_ Yes \_\_\_ No. If yes, submit DD Form 214 and Veteran's disability verification.
3. Spouse of 100% Disabled Veteran? \_\_\_ Yes \_\_\_ No. If yes, submit DD Form 214, veteran's disability verification and proof of marriage.
4. Spouse of Veteran on active duty at this time or within 180 days of the spouse's discharge or separation of service. \_\_\_ Yes \_\_\_ No.

## VI. QUESTIONS

Directions: Please answer each of the questions below as best you can. If more space is needed please attach additional pages. If you are typing your answers, please respond to at least one question in your own handwriting.

**1. Eligibility for hire:**

•Are you now under contract? \_\_\_Yes \_\_\_No.

If yes, with which school are you under contract & why do you wish to leave your current position? \_\_\_\_\_

•Do you have any condition (physical, mental, or otherwise) which prevents you from performing the essential functions of any of the positions for which you have applied, with or without accommodation? (Note: regular, dependable attendance is an essential function of certificated positions at NBC Public Schools.)

\_\_\_Yes \_\_\_No. If yes, describe: \_\_\_\_\_

**2. Interest in NBC**

•Have you previously filed a written application for employment with NBC Public Schools? \_\_\_Yes \_\_\_No. If yes, give date: \_\_\_\_\_

•Why do you want to be employed at NBC Public Schools? \_\_\_\_\_

•What experiences have you had with NBC Public Schools or the community of North Bend? \_\_\_\_\_

**3. Prior History:**

•Have you ever had failed or refused to fulfill a contract of employment with any school district? \_\_\_Yes \_\_\_No. If yes, describe: \_\_\_\_\_

•Have you ever had a diploma, credential, or certificate denied or revoked? \_\_\_Yes \_\_\_No.

If yes, describe: \_\_\_\_\_

## VII. PERSONAL DISCLOSURE

Respond to EACH item. If there is no response to any item, or if the required attachments do not accompany your application, your application WILL BE REMOVED FROM CONSIDERATION. Information provided in this disclosure will not automatically bar you from employment but will be considered in view of all relevant circumstances.

1. Have you ever received a ticket, been charged with, or been convicted of, a criminal offense relating to sexual or physical abuse?  
Yes \_\_\_ No \_\_\_

2. If you answered "Yes" to Question #1 above, you must explain each situation including location(s), date(s), agency(ies) involved, and the outcome of the each ticket, charge, or arrest (use an attachment if needed): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever had any license, permit, or certificate terminated, revoked, suspended, received a private or public reprimand or admonishment from a licensing agency or been subject to a judicial restraining or contempt order?  
Yes \_\_\_ No \_\_\_

4. If you answered "Yes" to Question #3 above, you must attach an explanation of each situation including location(s), date(s), agency(ies) involved, and the outcome of the each situation (use an attachment if needed): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from employment?  
Yes \_\_\_ No \_\_\_

6. If you answered "Yes" to Question #5 above, you must explain each situation including the name of the employer(s), the date(s) and reason(s) for the resignation or termination.  
\_\_\_\_\_  
\_\_\_\_\_

Note: School policy requires that a criminal history record information check be completed prior to employment.

### VIII. VERIFICATION

I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand it is my responsibility to immediately provide updated, correct information if any of the information changes at any time. I understand that any omission, falsification or misrepresentation made by me on this application or any supplement will be sufficient grounds for failure to employ me or for my discharge should I become employed with the school district. I understand that disclosure of social security number is optional. It will be used to conduct background checks for employment purposes and for personnel and payroll processing and required reporting if I am employed.

\_\_\_\_\_  
Legal Signature of Applicant

Date: \_\_\_\_\_, 20\_\_

**It is the policy of NBC Public Schools to not discriminate on the basis of sex, handicap or disability, race, color, religion, marital status, veteran status, or national or ethnic origin, or on the basis of genetic information, in its educational programs, admission policies, employment policies or other administered programs. This position is subject to a veterans preference. Persons requiring accommodations to apply and/or be considered for positions with NBC Public Schools are asked to make their request to the Superintendent.**