



# South Side Bee Branch School

334 Southside Rd  
Bee Branch, AR 72013  
Phone 501-654-2200  
Fax 501-654-2336

## **Certified Employment Application**

In keeping with guidelines of the Title VI, Section 601, Civil Rights Act of 1964, Title IX, Section 901, Educational Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973, the South Side Bee Branch School District assures that no person shall on the basis of race, color, national origin, sex, or handicap be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program in the South Side Bee Branch School District.

# South Side Bee Branch School District

## Instructional and Administrative Application

Name \_\_\_\_\_  
Last First Middle

Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Position Desired \_\_\_\_\_  
Elementary - Secondary - Administration

Years of Public School Experience \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

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

**This application is not complete without a copy of a current teaching certificate attached.**

References: Give at least four references, including administrators under whom you may taught, and have first-hand knowledge of your instructional or leadership ability.

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

### Education and Professional Training

| Name of School           | City & State | Attended<br>From/To | Graduation<br>Date | Degree |
|--------------------------|--------------|---------------------|--------------------|--------|
| HS _____                 | _____        | _____               | _____              | _____  |
| College _____            | _____        | _____               | _____              | _____  |
| College _____            | _____        | _____               | _____              | _____  |
| College _____            | _____        | _____               | _____              | _____  |
| Graduate<br>School _____ | _____        | _____               | _____              | _____  |

### Teaching or Administrative Training

List all experience in chronological order and account for each school year

| Employment Dates<br>From To | Name of School | Address | Position Held |
|-----------------------------|----------------|---------|---------------|
| _____                       | _____          | _____   | _____         |
| _____                       | _____          | _____   | _____         |
| _____                       | _____          | _____   | _____         |
| _____                       | _____          | _____   | _____         |
| _____                       | _____          | _____   | _____         |

## **Agreement**

I authorize investigation of all statements contained in this application. I understand misrepresentation or omission of facts called for is cause for dismissal without notice at any time during my employment. I understand that some jobs require special background checks prior to my employment and that failure to meet these requirements may lead to my rejection as an applicant for that job.

“I, \_\_\_\_\_, hereby give consent to any and all prior employers of mine and references to provide information with regard to my employment with prior employers to South Side Bee Branch School District.” This consent will be valid for no more than one year.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date