OFFICE ONLY Date received: \_



### **APPLICATION FOR EMPLOYMENT**

Name:					
	Last	First		Middle	
Current Address:					
	Street	City	,	State	Zip
Mailing Address (if	different):				
	Street		City	State	Zip
Phone Contacts: Ho	ome ( )	Cell (  )	Otl	her ( )	
Email address:					
List any relative emplo	yed by Blue Ridge Educational	l Center:			
Are you eligible for em	ployment in the United States	s?Yes	No		
Are you a former empl	oyee of BREC? Yes	No If yes, date	e of last employn	nent:	
Indicate General Ty	ype of Position(s) Desire	<u>d</u>			
Teacher Specialist	Instructional Assistant Administrator/Director	Tutor Office Manag	_ Counselor ger Cle	rical Otl	ner
Part Time	Full time				

My signature below authorizes Blue Ridge Educational Center to conduct a background investigation and authorize release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and education institutions, personal references, professional references and information from other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school and the reference source from any liability in connection with its release or use. This release includes the source cited above and specific examples as follows: the local Police Department, information from the Central Criminal Records exchange of either data on all criminal convictions or certifications that no data on criminal convictions are maintained, information from the Virginia or other State Department of Social Service Child Protective Services Unit and my Locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me.

Furthermore, 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, and I understand that any omission or falsification of any part of this application or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with Blue Ridge Educational Center.

Date:			Signature:		
	P.O. Box 1820	Front Royal Virginia 22603	(540) 631-9503	www.blueridgeeducation.org	

#### I. Education and Professional Training

Level of Education	Name of School or University	State	Type of Diploma/ Degree	Field of Study	Year of Graduation	Date in Attendance
Highest						
Prior						
Next Prior						
High School						

#### Professional Certificates or Licenses:

## II. <u>Student Teaching / Practicum Experience</u> (Instructional Applicants Only)

Name of School	School Division City/State	Grade Level or Subject	Date

Please attach photocopies of letters of reference or evaluations from student teacher supervisor and cooperating teacher(s).

**III.** <u>Licensure</u> (if applicable) Note: applicants holding a certificate from another state must obtain a Virginia certificate in order to teach in Virginia. Please submit a copy of your certificate(s).

Area of Certification	Issuing State	Date Issued

### IV. Teaching Experience (List chronologically)

Name of School	School Division City/State	Position Held/ Subjects Taught	Dates Mo/yr	Total Years

# V. Work Experience Other Than Teaching (list chronologically)

Employer	City/State	Position Held	Dates of Employment	Last Salary	Reason for leaving
Phone:					
Phone:					
Phone:					
Phone:					
Phone:					

May we contact former employers? Y \_\_\_\_\_ N \_\_\_\_\_

# VI. References (all applicants)

Name	Title/Company	Address/Phone
		Phone:
		Dhamar
		Phone:
		Dhanay
		Phone:
		Dhanay
		Phone:

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#### **Other Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experiences and/or any information you feel may be helpful in considering your application.

Date available to start employment: \_\_\_\_\_

Have you ever been?

- 1. Convicted of violation of the law other than minor traffic violations? Y\_\_\_N\_\_\_
- 2. Are you currently under charges for a criminal offense? Y\_\_\_ N\_\_\_
- 3. Discharged or requested to resign from a former position? Y\_\_\_ N\_\_\_
- 4. Refused renewal of contract? Y\_\_\_ N\_\_\_
- 5. Convicted of an offense involving molestation, physical or sexual abuse?
- 5. Investigated by the Department of Social Services (Child Protective Services)?

If the answer to any of the above questions is "Yes", please explain in detail.

Blue Ridge Educational Center is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, political affiliation, gender, religion, marital status, or disability in the admission or access to, and participation and employment in, its programs, services or activities.

(Office Only) Date of Hire: \_\_\_\_\_

P.O. Box 1820 Front Royal Virginia 22603 (540) 631-9503 www.blueridgeeducation.org

Y\_\_\_ N\_\_\_

Y N