

JOHNSTON CITY COMMUNITY UNIT SCHOOL DISTRICT NO. 1
200 E. 12th Street
Johnston City, IL 62951
(618) 983-8021

APPLICATION FOR CERTIFICATED POSITION

Important - Official transcripts showing all courses and Credentials (including 3 letters of recommendation and all teaching certificates) must be submitted to complete your application file.

PERSONAL DATA

NAME

LAST FIRST MIDDLE MAIDEN

PRESENT ADDRESS

Street City State Zip Telephone Number

PERMANENT ADDRESS

Street City State Zip Telephone Number

Social Security No. _____

PREFERRED POSITION

(Example: First Choice: Second Grade — Second Choice: Junior High School Science)

First Choice _____ Second Choice _____ Third Choice _____

Comments: _____

REFERENCES

Name Address Occupation

1. _____
2. _____
3. _____

It is the policy and practice of the District to decide all matters relating to employment on the basis of personal qualities and abilities. There is no discrimination because of race, religion, creed, color, sex, age, national origin, or physical or mental handicap unrelated to ability. Applicants need not furnish any information which they believe to be a violation of their legal or constitutional rights.

CERTIFICATION

List below the Illinois certificates for which you qualify. Indicate if the certificate has been issued or has been applied for.

Type	Number	Grade/Subject	Issued	Applied For

Special Education Approval _____ Area _____

EDUCATION

List below all schools you have attended.

Schools Attended (Begin with High School)	Location (City and State)	Dates Inclusive	Degree	Major	Minor

EXPERIENCE

List in reverse chronological order. Include other work experience as well as teaching and administration.
Beginning teachers include student teaching.

Place	Location (City and State)	Dates Inclusive	Assignment	Supervisor's Name

Are you currently under contract? _____ When will you be available? _____

ACTIVITIES

Please circle the activities for which you are qualified to:

COACH

Basketball
Track
Football
Volleyball
Softball
Baseball
Wrestling

Other _____

DIRECT

Instrumental Music
Vocal Music
Speech Activities
Dramatics
Other _____

SPONSOR

Student Council
Yearbook
School Paper
Cheerleaders
Pom Pon
Other _____

SUPERVISE

Bus
Playground
Clubs
Other _____

PERSONAL COMMENTS

What do you consider to be your chief accomplishments in your previous job or student teaching?

State your reasons for wanting to change your present position, or if not currently employed, why you want to join Community Unit School District No. 1.

What are your professional goals and plans? Why did you want to be a part of education?

In your own handwriting, state why you feel you should be considered for the position for which you are applying. Indicate your unique qualifications.

I hereby affirm that the statements made within this application are true and correct to the best of my knowledge and belief. I hereby authorize any individual, company, or institution with whom I have been associated to furnish Johnston City Community Unit School District No. 1 with any information concerning my employment. If employed, I hereby agree to comply with all relevant Illinois statutes affecting public school applicants and employees, and all pertinent rules and regulations of Johnston City Community Unit School District No. 1.

Date _____

Signature of Applicant _____

Return Completed Application to:
JOHNSTON CITY COMMUNITY UNIT SCHOOL DISTRICT NO. 1
200 E. 12th Street
Johnston City, IL 62951

NAME OF APPLICANT _____

SOCIAL SECURITY NUMBER _____

AREA IN WHICH YOU WISH TO APPLY:

ELEMENTARY (K-6): _____

Certificate type _____

Certificate number _____

ELEMENTARY (7-8): _____

SUBJECT AREAS CERTIFIED TO TEACH:

Certificate type _____

Certificate number _____

SECONDARY (9-12): _____

SUBJECT AREAS CERTIFIED TO TEACH:

Certificate type _____

Certificate number _____

DATE

SIGNATURE OF APPLICANT