

To Be Completed By Applicant
CERTIFICATE(S) HELD

Elementary (PreK-5)
 Middle School (6-8)
 Secondary (9-12)
 Subjects: _____

 Special Education
 Substitute Teacher
 Supervisor
 Principal
 Administrator
 Other

OFFICE USE ONLY

Date Interviewed: _____

By: _____

Disposition: _____

BOUND BROOK
BOARD OF EDUCATION
 OFFICE OF THE SUPERINTENDENT
 337 WEST SECOND STREET
 BOUND BROOK, NJ 08805

PROFESSIONAL STATEMENT OF APPLICATION

Applicant should print or type application and is held responsible for accuracy of all statements under penalty of rejection of the application. Any misrepresentation of facts found after employment begins will be considered grounds for immediate dismissal.

Last Name		First		M.I.	Date	
Street Address				Apartment/Unit #		
City		State		ZIP		
Phone			Business Phone			
E-Mail			Social Security #			
Position Desired			Salary Desired	Circle All That Apply	F/T	P/T
Date of Availability						
ARE YOU INTERESTED IN SUBSTITUTE TEACHING YES NO		CIRCLE DAYS WILLING TO SUBSTITUTE M T W TH F		INTERESTED IN HOME INSTRUCTION? YES NO		

EDUCATION

SCHOOL	NAME & ADDRESS	DATES OF ATTENDANCE	DIPLOMA/DEGREE EARNED	GRADUATION DATE
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
OTHER				

CERTIFICATION

AREA OF CERTIFICATION	TYPE (STANDARD, CERTIFICATE OF ELIGIBILITY, PROVISIONAL, ETC.)	ISSUING STATE	DATE ISSUED	EXPIRATION DATE

EMPLOYMENT RECORD

List all experience in chronological order beginning with current employment first

EMPLOYER NAME	TELEPHONE
ADDRESS	DATES OF EMPLOYMENT (MM/YY) FROM: _____ TO: _____
POSITION/TITLE	REASON FOR LEAVING
NAME & TITLE OF SUPERVISOR	FINAL SALARY

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POSITION/TITLE	REASON FOR LEAVING
NAME & TITLE OF SUPERVISOR	FINAL SALARY

DO YOU HAVE PLACEMENT CREDENTIALS ON FILE? IF SO, GIVE THE NAME OF COLLEGE AND/OR UNIVERSITY AND THE MAILING ADDRESS

MILITARY SERVICE

Are or were you a member of the U.S. Armed Forces?

Yes _____ No _____

Branch of Service: _____

Rank Held: _____

Dates of Service: _____

COMPUTER SOFTWARE

Familiarity with Computer Software (list) _____

Expertise with Computer Software (list) _____

REFERENCES

List three professional references

NAME	ADDRESS	TELEPHONE	YEARS KNOWN	RELATIONSHIP TO APPLICANT

Have you ever been convicted of any violation other than a traffic violation? No_____ Yes_____

If yes, please explain_____

This is an application for employment and is in compliance with the school district's affirmative action policy. An applicant who is offered employment will be required to complete supplemental forms giving such information as the district deems necessary for the maintenance of complete and appropriate personnel records.

I certify that all statements and information contained in this application are true, complete and accurate to the best of my knowledge. I understand that any misrepresentations, or omission, of facts shall be sufficient cause for: (1) rejecting my candidacy, (2) withdrawing any offer of employment, (3) terminating my employment. I hereby authorize investigation of all statements contained in the application. I release from all liability persons and organizations reporting information required by this application.

Signature of Applicant

Date

EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Bound Brook Board of Education not to discriminate on the basis of race, creed, color, sex, national origin, political affiliation, religion, sexual orientation, English proficiency, socio-economic status or disability.