

DATE

<b>PERSONAL INFORMATION</b>				
NAME(LAST, FIRST, MIDDLE)				SOCIAL SECURITY NUMBER
PRESENT ADDRESS:	STREET	CITY	STATE	ZIP
				PHONE
ALTERNATE ADDRESS:	STREET	CITY	STATE	ZIP
				PHONE
PROVIDE THE NAME OF A PERSON BEST ABLE TO LOCATE YOU WHEN NECESSARY:				PHONE
IF MARRIED GIVE MAIDEN NAME:			SPOUSE'S COMPLETE NAME:	
After reviewing the essential job function from the attached job description/posting, are you able to do them with or without reasonable accommodation? ___ Yes ___ No The District is concerned with your ability to perform the job and will not at this time consider your need for reasonable accommodation. If after reviewing your application form, verifying your responses and conducting necessary interviews or tests, you are considered for the job and would need reasonable accommodations to perform essential job function, the parties will explore these alternatives. REMEMBER: The DISTRICT may conduct a pre-employment exam which will determine whether you can do the essential functions of the job without substantial risks to yourself and the public.				
<b>ACADEMIC AND PROFESSIONAL INFORMATION</b>				
WHAT CLASS OF OKLAHOMA CERTIFICATE(S) DO YOU NOW HOLD? (Life, standard, provisional). WHAT TYPE? (Administrator, counselor, social studies, etc.)			TEACHER/CERTIFICATE NUMBER	EXPIRATION DATE
MAJOR TEACHING FIELD		SEMESTER HOURS	MINOR TEACHING FIELD	
ARE YOU CURRENTLY UNDER CONTRACT? ___ YES ___ NO		IF SO WHERE?	WHEN ARE YOU AVAILABLE FOR TEACHING?	
<b>STUDENT TEACHING EXPERIENCE</b> LIST ALL AREAS AND COOPERATING TEACHERS				
NAME OF SCHOOL	ADDRESS	AREA (GRADE OR SUBJECT)	DATES	NAME OF COOPERATING TEACHER
<b>RECORD OF EDUCATIONAL EXPERIENCE</b> BEGIN WITH MOST RECENT EMPLOYMENT. (A YEAR OF TEACHING IS AT LEAST SEVEN MONTHS OF REGULAR FULL TIME TEACHING. ALL TEACHING EXPERIENCE MUST BE VERIFIED IN WRITING AS SOON AS POSSIBLE AFTER EMPLOYMENT TO INSURE CORRECT CONTRACT SALARY.)				
SCHOOL	CITY & STATE	DATES FROM/ TO	NUMBER YRS./MOS.	GRADES, SUBJECTS, OR POSITIONS
<b>ACTIVE MILITARY EXPERIENCE</b> BRANCH OF SERVICE		DATES OF ACTIVE DUTY FROM TO		
<b>WORK EXPERIENCE</b> (OTHER THAN TEACHING OR MILITARY)				
EMPLOYER	ADDRESS	POSITION	DATES OF EMPLOYMENT	NO. MOS
<b>EXTRACURRICULAR ACTIVITIES</b> LIST STUDENT ACTIVITIES AND ATHLETICS WHICH YOU ARE ABLE TO DIRECT.				

EDUCATION			
	NAME AND LOCATION OF INSTITUTION	DATES	DEGREE (IF APPLICABLE)
High School			
College or University	Undergraduate		
	Graduate		

**REFERENCES**  
 LIST BELOW AT LEAST THREE OR MORE REFERENCES (NOT RELATIVES) INCLUDING ADMINISTRATIVE AND SUPERVISORY PERSONNEL WHO HAVE FIRST- HAND KNOWLEDGE OF YOUR PERFORMANCE AND/OR FUTURE POTENTIAL IN THE AREA FOR WHICH YOU ARE APPLYING (VOCATIONAL EDUCATION APPLICANTS SHOULD LIST ONE BUSINESS REFERENCE.)

NAME	OFFICIAL POSTION	COMPLETE ADDRESS

**Do you hold a current and valid Oklahoma operator's or commercial chauffeurs driver's license (with endorsements specific to the equipment you will be operating)?**  Yes  No **If so, give type, expiration date, and number:**

**Has your license been revoked or suspended in the last 5 years?**  Yes  No **If so, give year and reason:**

( A non-acceptable driving record may include more than two moving violations within the past three years; or any DWI, DUI or reckless driving (alcohol or drug related) within the last five years.

**FELONY QUESTIONNAIRE**  
 In response to legislation, Title 70 O.S. 1971, Sec. 6-103, every applicant is required to answer the following questions:  
 1. During the preceding ten-year period, have you ever been convicted of a felony?.....  Yes  No  
 2. During the preceding ten-year period, have you ever been convicted of a crime involving moral turpitude?  Yes  No  
 If the answer to either of the preceding questions is "Yes," state on a separate sheet of paper the nature of the charge and in what court you were convicted.

**IMPORTANT AUTHORIZATION AND CERTIFICATION**

I certify facts given in this application are true and complete to the best of my knowledge. I hereby grant permission to Crutcho Public Schools to investigate any information included in the application and I agree to submit to medical examination if required. I understand that this application is not a contract of employment. I hereby release the District and its agents from all liability in making any investigation and inquiry relative to information contained in the application form. I understand, that if employed, false or misleading statements given in this application or interview(s) may result in discharge. I understand that I am required to abide by all rules and regulations of Crutcho Public Schools.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Requirements for Employment:** If you are offered a contract, you must submit the following credentials: an official transcript from all universities and colleges attended, an original Oklahoma teacher's certificate. And proof of out-of-state teaching experience, (if applicable). These documents must be on file with the Division of Personnel Services before you will receive payment under the contract.

**RETURN APPLICATION** and one set of unofficial transcripts to:  
**PERSONNEL OFFICE**  
 Crutcho Public Schools  
 2401 N. Air Depot. Blvd.  
 Oklahoma City, OK 73141

**NOTICES TO APPLICANT**

Crutcho Public Schools does not discriminate in employment policies regarding selection, transfer, promotion, termination, compensation, or other benefits on the basis of race, creed, national origin, color, religion, age, disability, or sex.

Crutcho Public Schools is an equal opportunity/affirmative action employer.

Crutcho Public Schools is a tobacco-free work place effective June 8, 1991.

Crutcho Public Schools is a drug-free work place effective March 11, 1989.

The acceptance of an application is not a promise of employment.

Your application will remain active throughout the school year.