

# ***EAST CARROLL PARISH SCHOOL BOARD***

## ***Application for Certificated Positions***



***Dr. Voleria Millikin, Superintendent***

***514 Third Street  
Post Office Box 792  
Lake Providence, LA 71254  
Phone: 318.559.2222  
Fax: 318.559.3864***

***Where Education Is First!***

Office Use Only

File: \_\_\_\_\_

Ack: \_\_\_\_\_

Ref: 1) \_\_\_\_\_ 2.) \_\_\_\_\_

Interview Date: \_\_\_\_\_

LA Certified: \_\_\_\_\_

**East Carroll Parish School Board**

514 Third Street Post Office Box 792  
Lake Providence, Louisiana 71254

**APPLICATION FOR CERTIFICATED POSITIONS**

**Application For:**

- Teacher
- Ancillary Position
- Pupil Appraisal
- Other \_\_\_\_\_

Date \_\_\_\_\_

Office Use Only

Assigned to: \_\_\_\_\_

Effective Date: \_\_\_\_\_

Length of Contract: \_\_\_\_\_

Grade/Subject: \_\_\_\_\_

Position Code: \_\_\_\_\_

Replacing: \_\_\_\_\_

Contract Code: \_\_\_\_\_

Degree: \_\_\_\_\_

Experience: \_\_\_\_\_

**NOTICE TO APPLICANT**

The East Carroll Parish School Board does not knowingly discriminate against any employee or applicant for employment on the basis of race, color, religion, gender, age, national origin, handicap, or status as a Vietnam era or disabled veteran. This policy encompasses recruitment, selection, assignment, promotion, transfer, termination, compensation, training and apprenticeship, and all other terms, conditions, benefits and privileges associated with employment. This policy extends to the educational programs and activities operated by the state, districts and schools. Discrimination is specifically prohibited by Title IX of the Education Amendments of 1972, as amended, and Title 45, Subtitle A, Part 66, of the implementing regulations administered by the Director of the Office of Civil Rights of the United States Department of Health, Education, and Welfare.

**Section I Personal Information**

Name: \_\_\_\_\_  
LAST FIRST MIDDLE

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

Are you a citizen of the United States?  Yes  No

Current Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_ Alternate Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Permanent Mailing Address: \_\_\_\_\_  
Number and Street/Apartment Number

City

State

Zip

Have you ever worked in a Louisiana school system?  Yes  No

Have you ever applied for a teaching position in Louisiana?  Yes  No

Have you ever applied for a non-teaching position in a Louisiana school system?  Yes  No

Are you retired from a Louisiana retirement system?  Yes  No

If yes, name the school system from which you retired \_\_\_\_\_ Date of Retirement \_\_\_\_\_

Are you currently certified for the position for which you are applying?  Certified  Not certified  Not certified, but have applied

**Section II Position Desired**

**Preferred Assignment (specify grade levels and subjects);**

1<sup>st</sup> choice \_\_\_\_\_

2<sup>nd</sup> choice \_\_\_\_\_

3<sup>rd</sup> choice \_\_\_\_\_

Special Education Area(s) \_\_\_\_\_ Vocational Education Area(s) \_\_\_\_\_

If you wish to be considered for a **coaching assignment**, list sports (with experiences and records) in order of preference: \_\_\_\_\_

What student activities are you willing to sponsor? \_\_\_\_\_

What proficiencies do you have in computer technology? \_\_\_\_\_

**Section III Academic Record** (beginning with the most recent)

Institution and Location	Dates of Attendance		Degree & Date Awarded or Expected	Major or Field of Study	Full or Part Time	GPA in Major/GPA Overall
	From	To				
	Mo/Yr	Mo/Yr				
	Mo/Yr	Mo/Yr				
	Mo/Yr	Mo/Yr				

**Section IV Student Teaching Experience** (beginning with the most recent)

Complete this section only if you completed student teaching within the last three years

Dates		Name of School & School District	Grade(s) and or Subject(s) Taught	Name, Address, & Phone No. of Cooperating Teacher(s)	Name, Address, & Phone No. of University Supervisor(s)
From	To				
Mo/Year	Mo/Year				
Mo/Year	Mo/Year				
Mo/Year	Mo/Year				

**Section V Employment Information—Teaching Experience** (beginning with the most recent)

No additional employment experience

Dates		School District	Grade(s) and or Subject(s) Taught	Name, Address, Phone No. of School District	Reason for Leaving
From	To				
Mo/Year	Mo/Year				
Mo/Year	Mo/Year				
Mo/Year	Mo/Year				
Mo/Year	Mo/Year				

**Section VI Employment Information—Other Than Teaching** (beginning with the most recent)

Include part-time work and education related experience  No additional employment experience

Dates		Position	Name, Address, and Phone No. of Employer(s)	Reason for Leaving
From	To			
Mo/Year	Mo/Year			
Mo/Year	Mo/Year			
Mo/Year	Mo/Year			
Mo/Year	Mo/Year			

**Section VII Certification Information**

Do you hold a valid Louisiana Certificate?  Yes  No  No, but have applied  
 If Yes, is your Louisiana Certificate:  Current  Expired  
 Louisiana Certificate Type (Circle One) A B C Level 1 Level 2 Level 3 OS Ancillary(Type) \_\_\_\_\_

List Areas of Certification \_\_\_\_\_

Do you hold a valid certificate from another state?  Yes  No  No, but have applied

If Yes, indicate state \_\_\_\_\_  
 Out of State Certificate: Type \_\_\_\_\_ Number \_\_\_\_\_  
 List areas of Certification: \_\_\_\_\_

Do you hold a National Board for Professional Teaching Standards Certification?  Yes  No

## Section VIII Highly Qualified Information

If you hold a Current Louisiana Certificate complete this section

**If you have been deemed Highly Qualified by a school district in Louisiana, please check one the following paths in which you you became Highly Qualified**

### Elementary Teacher (1-6) or Teacher holding Elementary 1-8

1. Valid Teaching Certificate \_\_\_\_\_ and
2.
  - a. Passes Praxis Content Area \_\_\_\_\_;or
  - b. Achieved National Board Certification \_\_\_\_\_;or
  - c. Completed at least 12 semester hours in each of the four core disciplines \_\_\_\_\_; or
  - d. Met the HOUSSE definition (90continuing Learning Units) \_\_\_\_\_

### Middle School Teacher (6-8) or Elementary Teacher holding Elementary 1-8

1. Valid Teaching Certificate \_\_\_\_\_ and
2.
  - a. Passes Praxis Content Area \_\_\_\_\_;or
  - b. Achieved National Board Certification \_\_\_\_\_;or
  - c. Completed coursework equivalent to an academic major in a content area; or \_\_\_\_\_
  - d. Earned a masters in a content area; or \_\_\_\_\_
  - e. Met the HOUSSE definition (90continuing Learning Units) \_\_\_\_\_

### Secondary Teacher (9-12)

1. Valid Teaching Certificate \_\_\_\_\_ and
2.
  - a. Passes Praxis Content Area \_\_\_\_\_;or
  - b. Achieved National Board Certification \_\_\_\_\_;or
  - c. Completed coursework equivalent to an academic major in a content area; or \_\_\_\_\_
  - d. Earned a masters in a content area; or \_\_\_\_\_
  - e. Met the HOUSSE definition (90continuing Learning Units) \_\_\_\_\_

## Section IX PRAXIS Scores

In this section complete all items with scores from tests you have taken.

### National Teacher Examination (NTE)

Have you taken the NTW (required through 08/31/99)  Yes  No

If yes, when? \_\_\_\_\_

If Yes, provide the following scores.

Professional Knowledge Score \_\_\_\_\_

General Knowledge Score \_\_\_\_\_

Communication Skills Score \_\_\_\_\_

Specialty Area Score \_\_\_\_\_

### PRAXIS Examination

Have you taken the PRAXIS (required as of 09/01/99)?  Yes  No

If yes, provide the following scores.

(PPST) Written Test Reading Score: \_\_\_\_\_ Writing Score: \_\_\_\_\_ Mathematics Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Or

Computer Based Test Reading Score: \_\_\_\_\_ Writing Score: \_\_\_\_\_ Mathematics Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Principals of Learning and Teaching (PLT) Test Code: \_\_\_\_\_ Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

### Content PRAXIS Test(s)

Name of Test \_\_\_\_\_ Test Code: \_\_\_\_\_ Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Name of Test \_\_\_\_\_ Test Code: \_\_\_\_\_ Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Name of Test \_\_\_\_\_ Test Code: \_\_\_\_\_ Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Name of Test \_\_\_\_\_ Test Code: \_\_\_\_\_ Score: \_\_\_\_\_ Date Taken: \_\_\_\_\_

Effective September 1, 2006 : An ACT composite score of 22 or a SAT combined verbal and math score of 1030 may be used in lieu of Praxis 1 PPST Exams by prospective teachers in Louisiana.

**If you are non-certified teacher, please list your ACT or SAT score if you have not taken the PRAXIS I** \_\_\_\_\_

## Section X Extra-Curricular Activities

Beginning with the most recent, list up to four of the most significant extra-curricular/community activities and professional affiliations in which you have been most actively involved. Describe the nature of your involvement and/or responsibilities

Organization Name	Position	Years	Average Hours Per Week	Description of Activity

**Section XI Professional References**

Non-experienced teacher—Send reference requests to student teaching university supervisor(s), cooperating teacher(s), and school principal(s)

Experienced teachers—Send reference requests to principals, supervisors, and other who have observed and/or evaluated you most recently.

A minimum of two (2) references must be submitted.

Non-certificated teacher applicant—Send reference request to previous employer, supervisor, and person of standing in community who is familiar with you

Name and Position	Name of School District/Agency	Complete Mailing Address	Telephone Number (Including area Code)

**Section XII Additional Information**

1. When will you be available? (month/date/year)? \_\_\_\_\_  
 Are you currently under contract?  Yes  No Expiration Date \_\_\_\_\_  
 Where are you under contract? \_\_\_\_\_

2. Are you on approved leave from a school system?  Yes  No If yes, ending date \_\_\_\_\_  
 Type of leave Sabbatical \_\_\_\_\_ Leave of Absence \_\_\_\_\_ Other \_\_\_\_\_

3. Are you related to an employee/board member of the East Carroll Parish School District?  Yes  No  
 If yes, list the employee/board member’s position and relationship.  
 Position \_\_\_\_\_ Relationship \_\_\_\_\_  
 Position \_\_\_\_\_ Relationship \_\_\_\_\_  
 Position \_\_\_\_\_ Relationship \_\_\_\_\_

4. Have you ever been convicted of a felony?  Yes  No

5. Have you ever been convicted of an offense against the law or are you now under charges for any offense against the Law?  
 You may omit: 1. traffic violations other than convictions for driving intoxicated 2. any offense committed before you 17<sup>th</sup> birthday which was finally adjudicated in a juvenile court or under a Youth Offender law.)  Yes  No

6. While in the military service were you convicted by a general court-martial?  Yes  No  Non-applicable

7. Have you ever been terminated or recommended for dismissal by you employer?  Yes  No

If you check YES for Question 4,5,6, and /or 7 in section XII briefly explain in the space below.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Did you participate in the Louisiana Teacher Assistance and Assessment Program (LaTAAP)?  Yes  No  
**When?** \_\_\_\_\_ **Where?** \_\_\_\_\_  
 Did you successfully complete the program?  Yes  No

**Section XIV Release of Information**

**Release of Assessment and Evaluation Information**  
 La. R.S. 17:3884(D) requires that any school board wishing to hire a person who has been assessed or evaluated pursuant to the Children First Act, La.R.S. 17:3871, et seq., whether that person is already employed by that school system or not, shall request such person's assessment and evaluation results as part of the application process. Please be advised that, as part of the mandated process, your previous assessment and evaluation results will be requested. You have the opportunity to apply, review the information received, and provide any response or information you deem appropriate.

**Misconduct Disclosure**  
 I authorize East Carroll Parish School Board to make investigations and inquiries of my personal, employment, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from liability in responding to inquiries in connection with my application. East Carroll Parish School Board reserves the right to reject an incomplete application and further reserves the right to dispose of any application which is not current in a one-year period. References and personal information which become a part of this record are to be regarded as confidential and shall not be revealed to me. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employing authority, if employed.

I certify that answers given herein are true and complete to the best of my knowledge. I have read and agree with the information provided to me.  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section XIII Educational Philosophy**

In this section, please convey your philosophy of education—how you see yourself as a teacher; what you hope to accomplish in the classroom, the way you feel about the future of education, and how you as a person would be able to help East Carroll Parish educate the students so they can be productive citizens in the 21<sup>st</sup> century.

Lined writing area for educational philosophy.

Signed \_\_\_\_\_ Date \_\_\_\_\_

# Reference Form

## East Carroll Parish School Board

The applicant listed below is applying for a certificated position. As part of the selection process, a minimum of two (2) references must be submitted for each applicant. You have been asked to complete this reference form because of your familiarity with the applicant's ability, potential, and past performance. Your prompt attention in completing the items below and returning this form to us will be greatly appreciated. Your reply will be considered strictly confidential and will not be revealed to the applicant.

**Non-experienced teachers** - Send reference requests to student teaching university supervisor(s), cooperating teacher(s), and school principal(s).  
**Experienced teachers** - Send reference requests to principals, supervisors, and others who have observed and/or evaluated you **most recently**.

Applicant: \_\_\_\_\_  
First Middle Last

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

Position Desired:  Teacher  Ancillary Position  Pupil Appraisal

Check the appropriate box, which best describes the applicant in comparison with other persons you have known with compatible years of experience.

	Outstanding	Above Average	Average	Below Average	Poor
Accuracy and dependability					
Assessment of pupil needs and progress					
Classroom management skills					
Cooperation with others					
Correct use of standard English					
Development of conducive learning environment					
Effective Communication					
Enthusiasm for learning and teaching					
Flexibility					
Initiative and creativity					
Instructional planning					
Integrity					
Judgment and common sense					
Knowledge of subject matter					
Leadership potential					
Loyalty to administration and system					
Maturity (poise, self-control)					
Motivation and relationship to pupils					
Personal hygiene and grooming					
Positive attitude toward supervision					
Potential for professional growth					
Punctuality/Attendance					
Teaching-effective instruction					
<b>Overall estimate of Teaching Capability</b>					

1. Have you seen the applicant teach?                      Yes    No  
 2. Would you employ/re-employ this person?                      Yes    No  
 3. Would you want this person to teach your child?                      Yes    No  
 4. Would you prefer talking with us by telephone?                      Yes    No  
 5. For the position desired, I recommend the applicant:                      Highly Favorably With Reservation Not At All  
 6. How long and in what capacity have you know the applicant? \_\_\_\_\_

Additional comments: \_\_\_\_\_

Name of Reference \_\_\_\_\_  
 Title: \_\_\_\_\_  
 School/Organization: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

Please Return To:  
 EAST CARROLL PARISH SCHOOL BOARD  
 PERSONELL DIRECTOR  
 P.O. BOX 792  
 LAKE PROVIDENCE, LA 71254  
 PHONE: 318.559.2222  
 FAX: 318.559.3864

Signature of Reference \_\_\_\_\_

Date \_\_\_\_\_

*East Carroll Parish  
School District*

*Dr. Valeria Millikin  
Superintendent  
318.559.2222 Fax 318.559.3864*

**Sexual Misconduct Disclosure Statement**

As required by Louisiana Revised Statute 17:81.9 (Act 723), the applicant authorizes all previous employers to disclose any and all information in the applicant's personnel file related to instances of sexual misconduct with students committed by the applicant. The applicant releases previous and current employers from liability for providing the requested information to the East Carroll Parish School System.

- I have read and understand the statement above.
- I also understand that I cannot be considered for employment in the East Carroll Parish School System unless this form is signed.
- Once this form has been signed, the applicant may be hired on a conditional basis pending the review of any information obtained.
- I agree that a copy of this form will be sent to each of my previous employers.
- Each completed form received will be placed in my personnel file.

**Please check the appropriate box:**

- I have formerly worked in (a) school district(s) in the State of Louisiana.
- I have never worked in (a) school district(s) in the State of Louisiana.

\_\_\_\_\_  
PRINT FULL NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF EMPLOYEE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

.....

**This section to be completed by previous employer.**

Name of School System: \_\_\_\_\_

- There is no information in this employee's file indicating sexual misconduct.
- I have attached documentation regarding sexual misconduct.

Previous employer(s) should complete this form and return it within twenty (20) business days to the following address:

**East Carroll Parish School Board  
Human Resources Department  
P.O. Box 792  
Lake Providence, Louisiana 71254**

\_\_\_\_\_  
Print Name of Authorized HR Employee

\_\_\_\_\_  
Date

Signature of Authorized HR Employee: \_\_\_\_\_