

Runnemedede Public Schools

Runnemedede District Office
505 W. Third Avenue
Runnemedede, NJ 08078-1298

(856) 931-5364, ext. 213
Fax: (856) 931-4446

Application for Employment

Certificated Staff

1. Applications, résumés, materials and inquiries should be directed to the address above or email, pwilson@runnemededeschools.org .
2. When applying for employment, please include your résumé, the Employment Application form and attach a copy of your college transcript(s), if available. All questions on the Application Form must be answered. The Application Form is a legal document. Do not write "Refer to Resume."

I. PERSONAL INFORMATION

Name _____

Home Address _____

City _____ State _____ Zip Code _____

Home Phone (____) _____ Cell Phone (____) _____

Email address _____

The Runnemedede School District uses an automated phone system to deliver important, time-sensitive messages to all employees. Please list the number(s) you would like us to use to notify you of important events, messages, or emergencies.

(____) _____

(____) _____

II. POSITION(S) DESIRED

1. _____ 2. _____

3. _____ 4. _____

III. CERTIFICATION

I hold the following New Jersey School Certificate(s) issued by the Department of Education.
(Please send copy of certificate with application).

(circle one)

1. _____ CE CEAS Standard

2. _____ CE CEAS Standard

3. _____ CE CEAS Standard

If none, complete the following:

I have conferred with the Department of Education and anticipate that I will have a New Jersey Certificate by date of employment. Please attach a statement outlining the steps you have taken to attain NJ certification.

Signature

Highly Qualified Teacher Status

I am considered Highly Qualified per the New Jersey regulations in the following subject areas:

	Praxis Score/HOUSE Standard
1. _____	_____
2. _____	_____
3. _____	_____

IV. EMPLOYMENT RECORD: Please begin with the most recent position.

1. Position title _____ Employed from _____ to _____
Employed by _____
Business Address _____
Phone _____
Responsibilities _____

Last salary _____ Name of supervisor _____
Why do/did you desire to leave this position? _____

2. Position title _____ Employed _____ to _____
Employed by _____
Business Address _____
Phone _____
Responsibilities _____

Last salary _____ Name of supervisor _____
Why do/did you desire to leave this position? _____

3. Position title _____ Employed _____ to _____
Employed by _____
Business Address _____
Phone _____
Responsibilities _____

 Last salary _____ Name of supervisor _____
 Why do/did you desire to leave this position? _____

4. Position title _____ Employed _____ to _____
 Employed by _____
 Business Address _____
 Phone _____
 Responsibilities _____

 Last salary _____ Name of supervisor _____
 Why do/did you desire to leave this position? _____

V. OTHER PERTINENT EDUCATION EXPERIENCE:

POSITION	DATES Yr. to Yr.	EMPLOYER & LOCATION	COMMENTS

Military Service: Branch _____ Dates served _____
 Rank _____ Type of Discharge _____

VI. EXTRACURRICULAR/CO-CURRICULAR INTERESTS: Please list the names and levels (if applicable) of any extracurricular/co-curricular or athletic activities you may be interested in advising or coaching.

Activity / Sport	Summary of experience as advisor, coach, or participant	Lead Advisor or Assistant? (circle)	Head coach or Assistant? (circle)
		Lead / Assistant	Head / Assistant
		Lead / Assistant	Head / Assistant
		Lead / Assistant	Head / Assistant
		Lead / Assistant	Head / Assistant

VII. EDUCATION AND PROFESSIONAL PREPARATION:

DATE Month/Year	INSTITUTION Name/Location	DEGREE	MAJOR	MINOR

VIII. MEMBERSHIPS: Professional (Indicate offices held, if any)

IX. REFERENCES:

Please list three references, including individuals who are familiar with your business/educational career accomplishments. You may attach letters from any or all of these individuals as well. These references should be from board members, immediate supervisors, parents, co-workers or anyone else familiar with your work.

Name of Reference	Position/Relationship	Contact Number	Letter Attached (circle one) Yes No	May we Contact? (circle one) Yes No
_____	_____	_____	Yes No	Yes No
_____	_____	_____	Yes No	Yes No
_____	_____	_____	Yes No	Yes No

X. ATTRIBUTES

List three personal attributes and explain why you feel they will help assure your success as a teacher/administrator in our school district. Please note special job related skills or experiences you feel may be helpful in considering your application.

- a. _____
- b. _____
- c. _____

XI. HISTORY

1. Have you ever pled guilty or been convicted of a crime, disorderly conduct, drunken driving or participated in a pre-trial intervention program? _____ Yes _____ No

If so, please indicate when, where, and why: _____

The Board of Education reserves the right to make a routine inquiry with law enforcement agencies.

2. Have you ever been denied tenure? _____ Yes _____ No

If so, please indicate when, where, and why.

3. Have you ever been dismissed? _____ Yes _____ No

If so, please indicate when, where, and why.

4. Have you ever not had a contract renewed? _____ Yes _____ No

If so, please indicate when, where and why.

5. Is there anything in your health history that would preclude you from completing your responsibilities of the indicated job? _____ Yes _____ No

6. Are you subject to any visa or immigration status, which would prevent lawful employment?

_____ Yes _____ No

XII. EMPLOYMENT INFORMATION

1. Would you be willing to take a physical examination prior to employment? _____ Yes _____ No

2. Would you be interested in working as a substitute teacher or classroom assistant?

_____ Yes _____ No

3. When would you be available? _____

4. Please indicate your salary expectation. \$ _____

OPTIONAL:

- Attach copies of any written evaluations of your performance during the past year.
- Attach a writing sample.
- Attach any other information you think will be helpful to us as we consider your application.

ADMINISTRATIVE CANDIDATES ONLY:

- Attach copies of observations and/or evaluations you have written indicating both a strong employee and an employee in need of improvement.

I certify that the information included on and with my application is accurate and true. I have included all requested information. I authorize investigation of any statement contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I authorize the Board of Education to verify any and all information contained herein and to review my criminal history, military and disciplinary records from any source. I authorize my prior employer to disclose, make available and furnish to the Runnemede School District all of my prior performance evaluations

Criminal History Review Requirement

As required by New Jersey State Statute, all public school employees must submit to a criminal history background check through the state and FBI. This is to advise you that if you have had a prior conviction, you may be disqualified from employment in a New Jersey Public School.

Date: _____ Signature: _____

Please note: Pursuant to the OPEN PUBLIC MEETINGS ACT, the Board of Education will meet in private session to discuss applicants unless notified in writing by any candidate who wishes his/her deliberations to be held in public.