



Dayton City School

520 Cherry Street
Dayton, TN 37321
(423) 775-8414
www.DaytonCity.net

NOTICE TO APPLICANTS

Please read the entire application form.

An individual desiring a position with the Dayton City School System shall make application in the following manner:

1. The application must include a transcript of credits earned at the college(s) or university(ies) attended and a copy of Praxis or NTE scores.
2. A copy of your teaching license should be attached. Please do not submit your original.
3. If previously employed by a local Board of Education, the applicant shall provide evidence of acceptable resignation.
4. The completed application must be returned to Dayton City School System.
5. Please be advised that resumes and/or faxes will not be accepted in lieu of this application form.
6. All employees, prior to entering service, shall present certificate showing a satisfactory health record (physical).

Those applicants to be interviewed should have a VALID TENNESSEE CERTIFICATE or show PROOF OF BEING ACTIVELY INVOLVED in obtaining TENNESSEE certification.

Persons scheduled for an interview should arrive 15 minutes early to complete a writing fluency sample.

The Dayton City School System does not discriminate on the basis of race, sex, color, religion, national origin, age, disability or veteran status in the provision of services, in programs or activities or employment opportunities and benefits.



APPLICATION FOR TEACHER EMPLOYMENT

(PLEASE PRINT OR TYPE)

DATE OF APPLICATION _____

NAME _____

LAST FIRST MIDDLE HOME TELEPHONE

PRESENT ADDRESS _____

STREET CELL TELEPHONE

CITY STATE ZIP CODE

**I AM CERTIFIED IN THE FOLLOWING AREAS:
(ADMINISTRATIVE/TEACHING)** _____

LIST, IN ORDER OF PREFERENCE, THE GRADES, SUBJECTS AND/OR POSITIONS FOR WHICH YOU ARE APPLYING:

1. _____ 2. _____ 3. _____

CERTIFICATION

(LIST ALL AREAS IN WHICH YOU HOLD VALID TENNESSEE AND/OR OUT-OF-STATE TEACHING CERTIFICATES. NOTE: APPLICANTS HOLDING A CERTIFICATE FROM ANOTHER STATE MUST OBTAIN A TENNESSEE CERTIFICATE IN ORDER TO TEACH IN TENNESSEE PUBLIC SCHOOLS.)

| AREA OF CERTIFICATION | ISSUING STATE | DATE ISSUED |
|-----------------------|---------------|-------------|
| | | |
| | | |
| | | |
| | | |

EDUCATIONAL BACKGROUND

| | SCHOOL OR INSTITUTION AND LOCATION | DATE ATTENDED | DIPLOMAS, DEGREES OR CREDITS | YEAR GRADUATED |
|--------------------|------------------------------------|---------------|------------------------------|----------------|
| HIGH SCHOOL | | | | |
| COLLEGE/UNIVERSITY | | | | |
| COLLEGE/UNIVERSITY | | | | |
| GRADUATE STUDY | | | | |
| GRADUATE STUDY | | | | |

EXPERIENCE

(PRESENT OR MOST RECENT FIRST)

| Dates | | Name of Employer and Address | | Your Title |
|-----------------|--|------------------------------|---------------------|------------|
| From | | | | |
| | | | | |
| To | | | | |
| | | Number of Years | | |
| Work Performed: | | | Reason for Leaving: | |
| | | | | |
| Dates | | Name of Employer and Address | | Your Title |
| From | | | | |
| | | | | |
| To | | | | |
| | | Number of Years | | |
| Work Performed: | | | Reason for Leaving: | |
| | | | | |
| Dates | | Name of Employer and Address | | Your Title |
| From | | | | |
| | | | | |
| To | | | | |
| | | Number of Years | | |
| Work Performed: | | | Reason for Leaving: | |
| | | | | |

| |
|--|
| Teaching Experience: Total Number of Years |
| |
| Administrative Experience: Total Number of Years |
| |

PROFESSIONAL REFERENCES

| NAME | POSITION | ADDRESS | TELEPHONE |
|------|----------|---------|-----------|
| | | | |
| | | | |
| | | | |
| | | | |

TENNESSEE CERTIFICATION INFORMATION

| | | |
|--|---------------------|------------------|
| Permanent Number | Type of Certificate | Issue Date |
| | | |
| Name (as listed on Certificate) | Expires on | Years of College |
| | | |
| Areas of Certification (Give Code Number as shown on certificate) | | |

I hereby certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at any employment decision.

APPLICATION BECOMES VOID ONE YEAR FROM DATE SUBMITTED

 Date of application

 Signature of Applicant

AN EQUAL OPPORTUNITY EMPLOYER

THIS INFORMATION IS REQUIRED BY TENNESSEE CODE ANNOTATED

Knowingly falsifying the information required by Section 49-5-406 shall be sufficient grounds for your termination of employment from Dayton City School. You falsifying the information shall also constitute a Class A misdemeanor which must be reported to the District Attorney for prosecution. Be further advised that pursuant to Section 49-5-413, the accuracy of the information requested below may be verified. Such verification may include but not be limited to fingerprint and criminal records from the Tennessee Board of Investigation.



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CONSENT FOR CRIMINAL RECORDS CHECK BY LAW ENFORMENT AGENCIES

The Dayton City School System requires a local and state criminal background check on all new employees. An acceptable fingerprint record is part of the criminal background check.

**The cost of the entire investigation will be the responsibility of the applicant.
YOU MUST COMPLETE THIS PROCESS WITHIN THE FIRST 30 DAYS OF EMPLOYMENT.**

"I HEREBY CERTIFY THAT I (HAVE) OR (HAVE NOT) BEEN CONVICTED OF A MISDEMEANOR OR A FELONY IN ANY STATE OF THE UNITED STATES."

(IF "HAVE" IS INDICATED, EXPLAIN FULLY THE DETAILS OF EACH SUCH CONVICTION ON A SEPARATE SHEET)

(This section is to be completed by the applicant. Please print except where otherwise specified.)

I, _____, Social Security Number _____, have applied for a position with the Dayton City School System, and consent to a criminal background check by law enforcement agencies under the conditions stated above. I also authorize the release of such information to the Dayton City School System now and at any time during my employment, and hereby release, discharge, and waive any and all claims which may arise against you for the release of accurate information.

Current Address: _____

Driver's License Number _____

Place of Birth _____

Sex _____

Eye Color _____

Race _____

Hair Color _____

Date of Birth _____

Height _____

Information required for online finger print registration paper

APPLICANT'S SIGNATURE _____

Date _____

You are required to pay a fee for a fingerprint background check.

1. Fingerprints are done at the ArcPoint Lab, 9297 Rhea County Hwy, Dayton, TN (brick building across from new hospital)
2. After you fill out the application, Ms. Massengill will register your information and schedule you an appointment. You can pick up the registration paper the next day from the school office if you wish to take it with you, but you do not have to take it with you.
3. You must take your driver's license with the photo ID and a money order or cashier's check (made payable to MorphoTrust USA) with you to the ArcPoint Lab. Contact Dayton City School office for the exact fee (approximately \$40).
4. You will be notified as soon as we receive the results of your fingerprints.