

Hillsboro Public School District

P.O. Box 579
Hillsboro ND 58045-0579
(701) 636-4360

Your applicant file will be considered complete and available for consideration when the following information is received:

1. This Application
2. Resume & Cover Letter
3. Transcripts of College Credits
4. Letters of Recommendation
5. A Photocopy of your North Dakota Teaching License
6. Email completed packet to paula.suda@k12.nd.us

Teacher Application

What specific position are you applying for? _____

Personal:

Name _____

Home Address _____

Primary Phone: _____ Home: _____

Email Address: _____

Social Security Number _____

Licensure:

Do you hold a valid North Dakota's Educator's Professional License? Yes _____ No _____ Have Applied _____
If Yes; complete the following:

License Number _____ Issued _____ Expires _____

Major(s) _____

*Highly Qualified _____

Endorsements _____

*Highly Qualified as per requirements for the state of North Dakota Questions? www.state.nd.ud/espb

Educational Preparation: (College/Trade School, High School)

High School: _____ Location: _____

College: _____ Location: _____

Field of Study _____ Degree _____ Date Completed _____

College: _____ Location: _____

Field of Study _____ Degree _____ Date Completed _____

Teaching Experience:

Present Employment:

Name/City/State _____

Position _____ Supervisor _____

Duties performed _____

Date Started _____ Current Salary _____

Previous Employment:

Name/City/State _____

Position _____ Supervisor _____

Duties performed _____

Date Started _____ Starting Wage _____ Ending Wage _____

Reason for leaving _____

Previous Employment:

Name/City/State _____

Position _____ Supervisor _____

Duties performed _____

Date Started _____ Starting Wage _____ Ending Wage _____

Reason for leaving _____

Other Work Experience:

Name/Location	Type of Work	Dates (To/From)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

References:

	Name	Title	Current Address	Phone
1.	_____			
2.	_____			
3.	_____			

General Information:

1. Are you currently under contract for the next school year? _____ If so where? _____
2. Have you ever been discharged or non-renewed for cause from a teaching position? _____
3. Have you ever had a certificate or license revoked or suspended? _____
4. Have you ever been convicted of a felony? _____
5. Have you ever been convicted of any crime against a child? _____

If you answered yes to any of the above, please explain:

Authorization:

I certify that all facts contained in the application are true and complete to the best of my knowledge and understand and agree that any misstatement will be grounds for disqualification or dismissal from employment by Hillsboro Public School District #9.

I authorize investigation of all statements contained herein and the references and the employers listed to give you any and all information concerning my previous employment and pertinent information they may have personal or otherwise. I authorize you to request a criminal history background check and consumer or investigator report. I release the Hillsboro Public School District #9 of any liability and any damage that may result from utilization of such information.

I understand that by providing information on this application that there is no contractual or implied agreement between myself and the Hillsboro Public School District #9.

Applicant Signature

Date

The Hillsboro Public School District #9 does not discriminate on the basis of race, color, national origin, sex, handicap, disability, or age in its educational programs/activities and employment policies/practices.