1202 Old Murphy Road Franklin, North Carolina 28734

Phone: (828) 524-3314 Fax: (828) 369-7240

www.macon.k12.nc.us

APPLICATION for PROFESSIONAL EMPLOYMENT

PERSONAL INFORMATION								
Name	red Title First	16:171.0	· . 7					
Preferi	red Title First	Middle/N	1aiden	Last	Nickname			
Permanent Addres								
Uoma Dhona (Street	Call Phone	City	State Email:	Zip			
		Cell Phone	()	Етан:				
Temporary Addres	SS	State	7.	From:	To:			
Temporary Phone	Street City ()	Other Phon	e ()	Email:	To:			
Social Security Nu	ımber:	□ Nev	w Applicant □	Former Applicant 🗆 I	Former Employee			
Position for which app Examples: K-6, Art, 9					ense in each area of choice.			
First Choice:	First Choice: Second Choice:							
Third Choice:	Third Choice: Date Available for Employment:							
Please state briefly yo	ur reason for wanting	to teach in North C	arolina:					
]	Professional Lice	nsure Inforn	nation				
license. It is your resp	onsibility to obtain and	d maintain your lice	nse in a curren		t individuals qualifying for a			
North Carotina ticens	e basea on reciprocity	wiin anoiner state t	ire requirea io	meet North Carolina's r	equirements.			
Do you hold a North (Carolina license?□ Yes	\square No If yes ,plea	se enclose a co	py and complete the follo	owing information:			
Date License Issued: Date Effective: Date Expires:								
PROGRAM	LICENSURI	E AREA(S)	CLASS	EXP	ERIENCE			
Example: 01 (initial)	78400 (Grades 6-9		A		1 year			
Subject (s) in which you	avnaet to vaccing a North	Carolina license (if	y do not have a	20):				
	•							
Other states in which you	ı hold a valid teaching lic	ense/certificate.(Pleas	se send copy(s):					

	Ed	lucational Pr	eparation					
Level of Education	Name of School or University	State	Dates Attended	Field of Study	Degree Awarded			
High School								
College								
	enclose copies of all college transcripts.	- 37						
Have you comp	oleted North Carolina Effective Teacher Training	? □ Y es □ No EXAMINATION		h a copy of verification.				
Please complete	e the section below indicating which tests you ha	ve taken and enc	lose a copy of your		ou have taken: s □ No			
				_Copy Enclosed? □ Ye	s □ No			
				_ Copy Enclosed? □ Ye	s □ No			
	d student teaching within the last three years or a		eaching, please sup					
	ress							
	TEACHER							
COLLEGE SUI	PERVISOR							
College/Univer	rsity Address		Phone	Number				
Home Address			Phone	Number				
	Teaching Experience (List Chronologica	ally all teaching o	experience. Do NO	T include Substitute Teach	hing)			
_								
Have you ever	achieved tenure in a North Carolina School Syste	em? □ Yes □ No	If yes, when and v	where?				

		WORK EXI	PERIENCE OTHER THAN TEA		
Employ	ver	Location	Type of Work	Dates of Employment	Reason for Leaving
			REFERENCE	S	
ach applican	nt must provide	the following informa	ution to he considered for employs	nent in a school system in North C	'arolina:
• •	•	, ,	v 1 ,	•	
				employed, or last employer if not	
				aracter are not acceptable. Refere	
				hievements and work history are p	
			registerea with a college placeme s) in the placement file and list na	ent office must include references f mes helow	rom their student teaching
Name of Re		Position Position	Complete Mailing Address	Telephone Number	Email
				Work / Home	
			No □ Not Applicable	£12	
iay we snare	your name/app	olication with other sc	hool employers as they request re	gerrais?	
			Additional Infor	matian	
T/EC N/	O DI				
YES N			iate answer to each of the j	-	
				on of employment or been d	ismissed, fired,
	disch	arged, suspended	l or otherwise subject to dis	sciplinary action?	
	Have	Have you ever had a teaching license/certificate suspended or revoked?			
	Have	you even been co	onvicted of any violation of	the law other than a minor	traffic ticket?
	11410	Have you ever entered a plea of nolo contendere (no contest) to any charge against you?			
		you ever entered	a pied of <u>noio contendere</u>		
	Have			st vou or are vou currently	involved in any
	Have Do ye	ou have any crim		est you or are you currently upervised probation?	involved in any

Driver's License Number _____ State ____ Class ____

additional information regarding your	any additional information you would like to share about yourself. This information could be a short autobiography, r cultural and educational background, your preparation, experience, interests and hobbies, plans, recreational ences with children. Please feel free to elaborate on information already given elsewhere in this application.
	Applicant's Certification & Release of Liability
personal or employment history, exprinclude fingerprint identification. I fur agency to give the Board of Education employment application by the Board application is submitted and any and information. If employed, I further autifuture employers or prospective employoriginal.	hereby expressly authorized the Board of Education, its agents and its employees to make any investigations of my essly including, but not limited to, federal and/or state criminal, law enforcement or traffic records, which may other authorize any former employer, person, firm, corporation, credit agency, administrative body or governmental in, its agents or its employees any information they may have regarding me. In consideration of the review of my of Education, its members, officers, agents or its employees, I hereby release the Board of Education to which this all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this thorize this Board of Education or its agents to provide information about my employment in this school system to object. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed
I am employed, false statements on the	in the application carefully and certify that the information I have given is correct and complete. I understand that if is application shall be considered sufficient cause for dismissal. I understand that I am not required to disclose any been expunged from the public record.
Date	Applicant Signature
All North Carolina public schoo	I systems are equal opportunity employers and do not discriminate on the basis of race, color,

All North Carolina public school systems are equal opportunity employers and do not discriminate on the basis of race, color religion, gender, age, disability or national origin.

To submit your application, please choose one of the following options:

- 1-Save the document on your computer, attach and submit via email to personnel@macon.k12.nc.us or
- 2-Print the document and send via mail to:

Personnel Department Macon County Schools 1202 Old Murphy Road Franklin, NC 28734

Macon County Schools DISCLOSURE - NOTICE REGARDING BACKGROUND INVESTIGATION

The Macon County School system may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and / or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and / or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. The most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and / or employment history conducted by Background Investigation Bureau, LLC, ("BIB") who may be reached at 9710 Northcross Center Court, Huntersville, NC 28078, or by phone at (877) 439-3900 or by another outside organization. Other types of information that may be obtained include but are not limited to social security number verification, sex offender registry checks, criminal records checks, inmate records searches, motor vehicle records, and court records checks. The information contained in these consumer reports may be obtained by BIB from public record sources and will not be used to discriminate against you in violation of any law. The scope of this Disclosure and Authorization is all-encompassing, allowing the Macon County School system to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. The BIB privacy policy may be found at www.BIB.com

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Macon County School system by directly contacting the consumer reporting agency identified above.

AUTHORIZATION AND ACKNOWLEDGMENT

I acknowledge receipt of the DISCLOSURE - NOTICE REGARDING BACKGROUND INVESTIGATION and "A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT" and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and / or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, institution, school or university (public or private), information service bureau, past or present employer or supervisor, private business, insurance company or personal reference, and / or other persons to furnish any and all background information requested by BIB, additional third-party organizations acting on behalf of the Macon County School system, and / or the system itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

Please check this box if you are a Min			yee and wo	uld like 1	to receive a copy of a consumer repor	
if one is obtained by the Macon Count Please check this box if you are a Cal report or consumer credit report if receive such a copy under California Macon County School system informe	ifornia applican one is obtained l law. NOTE – If	t or employee and you v by the Macon County So you elect to receive a c	hool systen opy, you ar	n at no e requir	charge whenever you have a right to ed (on an ongoing basis) to keep the	
Personal Identifying Information for	Consumer Repo	rting Agency – please pr	int or type (list all n	ames used; maiden, surname,	
Last Name		First		Middle		
Last Name		First		Middle		
Last Name		First		Middle		
Street Address			Apartment/Unit			
City	State ZIP					
Phone		E-mail Address				
*Date of Birth	*Social Security	No.	Gender		Race	
Drivers License Number		State Issued		Expire	S	
This information is for the sole purpose School system for discriminatory purposes California applicants or employees on	5.					

Date:

Signature: _