

**Hermitage School District**  
**312 North School Drive**  
**Hermitage Arkansas 71647**  
**Phone: 870.463.2246 Fax: 870.463.8520**

**Certified Employment Application**

In keeping with the guidelines of Title VI, Section 601, Civil Rights Act of 1964, Title IX, Section 901, Educational Amendments of 1972, and Section 504 of the Rehabilitation Act of 1973, Hermitage School District assures that no person shall on the basis of race, color, national origin, sex or handicap be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program in the Hermitage School District.

**Applications will be kept on file for two years.**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_  
(Last) (First) (MI)

**Mailing Address** \_\_\_\_\_  
(Street) (City) (State) (Zip)

**Email Address** \_\_\_\_\_

List any other names used if different from name on this application \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

**Position Desired** \_\_\_\_\_

**Phone Number(s)** \_\_\_\_\_

- Are you currently on the child maltreatment registry? **Please choose:**  **Yes** or  **No**
- Have you ever been convicted of a felony? **Please choose:**  **Yes** or  **No**
- Are you willing to undergo a criminal background check as required by Act 313 of 1997? **Please choose:**  **Yes** or  **No**
- Are you a veteran, disabled veteran, or an unmarried surviving spouse of a deceased veteran? **Please choose:**  **Yes** or  **No** (veterans/disabled veterans must provide a copy of your DD214 with application. Unmarried surviving spouses must provide a marriage certificate, death certificate, and DD214 with application.)

**Area(s) of Certification**

List all areas of current teacher certification and attach copy of current Arkansas teaching license with application.

**Special Training/Skills/Qualifications:** List all job related training or skills you possess and machines or office equipment you can use, such as printing or graphics equipment, computer equipment, types of software and hardware.

**Licenses/Certifications:** If a license, certificate, or other authorization is required or related to the position for which you are applying, complete the following:

License/Certification (P.E., R.N., L.P.N., etc.)	Date Issued	Date Expires	Issued by/Location State/Authority	License Number

**Education**

Note: Applicants may be required to provide proof of diploma, degree, transcripts, certifications, licenses, and registrations.

High School Graduate or GED? Please circle: **Yes or No**

Type of School	Name and Location of School	Dates Attended	Date Graduated	Expected Graduation Date	Sem/Clock Hours Completed	Type of Diploma or Degree	Major/Minor Fields of Study
Undergraduate or Colleges or Universities							
Graduate Schools							
Technical or Vocational Schools							

**Employment History**

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

- Employer addresses must be complete mailing addresses, including zip code.

Position Title:

Employer:

Mailing Address:

City, State, Zip

Employer's Telephone number:

Starting Date - Leaving Date

Specific reason for leaving:

Position Title:

Employer:

Mailing Address:

City, State, Zip

Employer's Telephone number:

Starting Date - Leaving Date

Specific reason for leaving:

Position Title:

Employer:

Mailing Address:

City, State, Zip

Employer's Telephone number:

Starting Date - Leaving Date

Specific reason for leaving:

- Have you ever been discharged or had a contract non-renewed? Please choose: Yes or No (if yes, specify on a separate page)

- Why do you wish to leave your current position? \_\_\_\_\_

\_\_\_\_\_

- Why do you want this job and what do you believe that you can bring to this job?

\_\_\_\_\_

\_\_\_\_\_

Have you ever been employed by Hermitage School District? Please choose:  Yes or  No

If yes, give dates and department \_\_\_\_\_

Have you ever been employed by or retired from any Arkansas government employer? Choose  Yes or  No

If yes, give dates and department \_\_\_\_\_

\_\_\_\_\_

**References**

Please list at least three people who you have worked with and are knowledgeable about you as an employee.

Name	Title	Address	Phone	Email

**Applicant's Acknowledgement, Authorization, and Release** Please read carefully before signing:

Application forms are sent to all who request them, regardless of existing vacancies. The issuance of such forms does not signify that the applicant is under consideration for employment. An application remains active for a period of two years and must be renewed following this period. If recommended for employment, a non-criminal background check, a maltreatment check, a copy of your social security card, and a copy of your driver license will be required.

I certify that the information given by me in this application is true and correct without omissions of any kind. I agree that the Hermitage School District shall not be held liable in any respect if my employment is terminated because of false statements, answers or omissions made by me in this application. I authorize the Hermitage School District to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation or governmental agency to disclose to Hermitage School District any information regarding me. In consideration of the Hermitage School District review of this application, I hereby release the district as well as any other provider of information from any liability and for any damage that may result from the furnishing and receiving of this information. A copy of this authorization and release is as valid as the original and should be recognized as such.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_