

**NIPPERSINK SCHOOL DISTRICT #2**

**10006 Main St.  
Richmond, IL 60071  
815-678-4242**

**APPLICATION FOR EMPLOYMENT**

*(Condition of Employment: Negative drug screen – expense paid by district)*

Please Type or Print

Date \_\_\_\_\_

**I. PERSONAL DATA**

Name \_\_\_\_\_  
(Last) (First) (Middle)

Present Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Present Telephone # \_\_\_\_\_ Permanent Telephone # \_\_\_\_\_ E-mail \_\_\_\_\_

Permanent Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**II. POSITION DESIRED**

Full-Time Teaching \_\_\_\_\_ Administration \_\_\_\_\_ Substitute Teaching \_\_\_\_\_ Other (List) \_\_\_\_\_

First Choice \_\_\_\_\_ Second Choice \_\_\_\_\_  
Subject/Assignment Area Subject/Assignment Area

**III. EDUCATION AND PROFESSIONAL TRAINING**

Name of Institution	Location	Dates Attended	Major/Minor	Degree And Date	Semester Credit Hours Earned*

\*Convert quarter hours into semester hours by multiplying the quarter hours by 2/3

List any scholarships, honors, or other distinctions you have received \_\_\_\_\_

List any collegiate or professional organizations in which you held/currently hold membership and any offices held \_\_\_\_\_

**IV. CERTIFICATION/ENDORSEMENTS**

Are you eligible for or do you hold Illinois certification for the position to which you are applying? \_\_\_\_\_ If yes, list type, \_\_\_\_\_ number, \_\_\_\_\_, **IEIN Number (located above name on certificate)** \_\_\_\_\_ and date issued or expected \_\_\_\_\_

Certificate Level: \_\_\_\_\_ Initial \_\_\_\_\_ Standard \_\_\_\_\_ Master

List all subjects for which you are endorsed to teach \_\_\_\_\_

**V. EMPLOYMENT STATUS**

Are you currently employed? \_\_\_\_\_ Where? \_\_\_\_\_

Are you currently retired? \_\_\_\_\_

Do we have permission to contact your present employer or supervisor? \_\_\_\_ Yes \_\_\_\_ No

**VI. WORK EXPERIENCE IN EDUCATION**

List all positions held, starting with most recent. Include student teaching experience. Add additional sheet if necessary.

Dates From/ To	School & Location	Position Subject/Grade Taught	Annual Salary (last year)	Name of Principal/Supervisor & Telephone #	Reason for Leaving

**VII. OTHER REFERENCES**

Name	Position	Address & Telephone	For Office Use Only

**VIII. BACKGROUND DATA**

Have you ever been convicted of a felony? \_\_\_\_ If yes, explain \_\_\_\_\_

Have you ever been terminated or had your contract not renewed? \_\_\_\_ If so, why? \_\_\_\_\_

**IX. AFFIRMATION**

I hereby affirm that the information given by me in this application is true and complete to the best of my knowledge; and, I hereby grant permission to authorized personnel in the district the right to examine my records for the purpose of hiring. I understand that any misrepresentation, falsification, or omission will be sufficient cause for cancellation of the application, or discharge if I have been employed.

\_\_\_\_\_  
Signature Date

**FOR OFFICE USE ONLY**

A. Creditable experience (years) \_\_\_\_\_ Lane \_\_\_\_\_ Step \_\_\_\_\_

B. Salary \$ \_\_\_\_\_ Start Date \_\_\_\_\_

C. Recommended for hire by \_\_\_\_\_ file/form-App for Employment 022410