## FRANKLIN PARISH SCHOOL SYSTEM

7293 Prairie Road Winnsboro, Louisiana 71295 (318) 435-9046 Telephone

App	lication for Pr	ofessional Emp	loyment
Full Name:			Soc. Sec. #
Last	First	Middle	
A ddmaga.			Date of Birth:
Address: (physical & mailing) Street	City	State/Zip	Phone:
MaleY	Female _		_
Are you Hispanic/Latino:Y Am. Indian/Alaskan Native Pacific Islander; White (This information shall be used for state)	e; Asian;B	lack or African Am.;	Native Hawaiian or other
Do you wish for any of your personal i	nformation to be release	ed? Yes	No
Certification: State	Class/type/	#	Retiree Return to work
Area(s) of Certification:			
		Information	
1. After filing application, candid	ates for employment	should request an inter	rview with the Personnel Director.
2. The applicant shall submit a coplacement file and official transc		cate or letter of application	ation for certificate, a college
3. Salaries are determined by app	roved and verified ex	perience, education an	d salary schedules.
4. This application will remain accontacting the personnel office.	ctive for one year upo	n date of receipt. App	licants may renew the application by
5. Principals, supervisors and oth	ers listed in this appli	cation will be contacte	ed for references.
6. Release of all personnel evalua	tion results are requi	red for consideration fo	or employment.
7. The Franklin Parish School Sy age, or disability in employment of			ace, color, national origin, sex, religion,
	For Off	ice Use Only	

College: List in ord Attendance	der of Locati	on	Dates attended From - Until	Major	Minor	Degree Awarded	
Undergraduate C	Grade Point A	Average:		_ PRAXIS I S	Scores:		
~							
College Activitie							
				Math			
				Maui. PLT K-6/&-	12:		
				PRAXIS II Scores:			
Student Teachin	_			Specialty Ar	ea:	<del></del>	
Grade and/or Su	bject taught:			Score:			
School:				SS.			
			114410.				
Supervising Tea	cher:		Colle	ege Supervisor			
Grade made in S	tudent Teach	ning:		ress:			
			hing Experie			T	
School	Address	Phone	Principal	Grade/	No. of	`	
				Subject	Years	01/01/99 to	
						12/31/99)	
Are you currently							
Have you ever b			i to resign, or re	rusea tenure?	1 es	NO:	
If yes, explain o	n separate pa	per.					

**Professional Preparation** 

Professional Activities							
Professional organizations, committees, presentations, publications:							
Other Work Experience							
Position	Addres		Supervisor	Pho	ne	No. of	Dates (ex.:
						years	01.01.99 to 12.31.99)
							12.31.99)
		D					
(4	other the		sonal Referent ose principals or		re alread	dy listad)	
(			E FULLY, INCLU				
Name		Address	,	Phone		Relations	hip
			Narrative				
In your own ha	ndwritin	g, describe why	you want to teach	in Frank	lin Paris	h.	
			•				

## PROFESSIONAL CONDUCT FORM

	Please Check		
	-	YES	NO
1.	Have you ever had any professional license/certificate denied, suspended, revoked or voluntarily surrendered?  If YES, in which state?		
2.	Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending?  If YES, in which state?		
3.	Have you ever been convicted of any felony offense, been found guilty or entered a plea of <i>nolo contendere</i> (no contest), even if adjudication was withheld?  If YES, please provide the following information:  Date of Conviction: Court Jurisdiction of Conviction:		
4.	Have you ever been convicted of a misdemeanor offense that involves any of the following?  a. Sexual or physical abuse of a minor child or other illegal conduct with a minor child.		
	b. The possession, use, or distribution of any illegal drug as defined by Louisiana or federal law.		
5.	Have you ever been granted a pardon for any offense as stated in # 3 or # 4?		
6.	Have you ever engaged in sexual misconduct with a minor or student?  If YES, in which state?	ı	
7.	Have you ever been accused of sexual misconduct with a minor student? If <b>YES</b> , in which state and nature of allegation.		
8.	Within thirty-six (36) months before or after your resignation, retirement or termination from your previous employment, have you been the subject of any investigation of alleged sexual misconduct with a minor or student? If <b>YES</b> , in which state and nature of allegation.		
9.	Have you every abused or neglected a minor or student?  If YES, in which state?		
10.	Have you ever been accused of abusing or neglecting a minor or student?  If <b>YES</b> , in which state and nature of allegation.		
11.	Have you ever been the subject of an investigation of alleged neglect or abuse of a minor or student?  If YES, in which state and nature of allegation.		
	CERTIFICATION, AUTHORIZATION AND RELEASE IMPORTANT: READ C.		

I certify that the information which I have provided in the attached application package is true and complete. I understand that furnishing inaccurate or false information or omitting information on this application could disqualify me from consideration for employment, could lead to my discharge from employment or could constitute a crime. I hereby authorize the <a href="Franklin">Franklin</a> Parish School Board to request, receive, and review my prior evaluations and information relative to sexual misconduct and/or abuse (if any) with minors or students from all of my current or previous school system employers. I further release the <a href="Franklin">Franklin</a> Parish School Board and all current and former employers, their agents and employees from any liability connected with such disclosures and do hereby specifically authorize such employer(s) to release to the <a href="Franklin">Franklin</a> Parish School Board such information and documentation as may be requested in connection with my application for employment with it. Copies of this document may be accepted as originals. I also affirm that I have not been terminated from any prior school system employer nor have I resigned my employment with a school system in lieu of termination.

## STOP! CAREFULLY REVIEW YOUR ENTIRE APPLICATION BEFORE SIGNING.

(Revised 01.06.20 - My doc. personnel matters, tea. matters, tea app new)

I have read and reviewed all of the informatio	n in this application prior to signing below. All
information provided hereinabove and in the attached	documents is true, accurate and complete.
Signature:	Print Name:

Date of Signature: