## HILLDALE PUBLIC SCHOOL 500 EAST SMITH FERRY ROAD MUSKOGEE, OKLAHOMA 74403 (918) 683-0273

## **CERTIFIED PERSONNEL APPLICATION**

DATE	SOCIAL SECURITY						
NAME IN FULL							
PLACE OF BIRTH							
		TELE. NO					
PERMANENT ADDRESS_			TELE. NO				
FOR WHAT POSITION DO	O YOU WISH TO APP	LY?					
FIRST CHOICE	SE	SECOND CHOICE					
EDUCATIONAL AND PROFESSIONAL TRAINING							
NAME OF SCHOOL OR INSTITUTION HIGH SCHOOL	COURSE TAKEN			SEMESTER HR CREDIT			
COLLEGE							
UNIVERSITY							
GRADUATE							
SPECIAL							
			NO. OF HOURS				
MINOR SUBJECTS:			NO. OF HOURS				
TEACHING AND/O	OR WORK EXPERIENCE (BEGIN WITH LATES			RY SERVICE			
NAME OF SCHOOL, FIRM & LOCATION	SUBJECT TAUGHT EXPERIENCE	DATE	MONTHS	SALARY SCHEDULE			
	27						

1.	LIST ACTIVITIES WITH CHILDREN, YOUTH, OR ADULTS YOU ARE PREPARED TO DIRECT.						
	1/20						
2.	WILL YOU ACCEPT SALARY PROVIDED BY SCHEDULE?						
3.	ADD BY LETTER ANY ADDITIONAL THAT WILL GIVE US A MORE COMPLETE ESTIMATE OF YOUR TRAINING EXPERIENCE, CHARACTER AND ABILITY. LIST HONORS WON, POSITIONS TO WHICH YOU HAVE BEEN ELECTED AND PROFESSIONAL ORGANIZATIONS TO WHICH YOU BELONG.						
4.	WHEN COULD YOU BEGIN WORK?						
5.	REFERENCES: GIVE US AT LEAST FIVE REFERENCES, INCLUDING ESPECIALLY PRINCIPALS, SUPERINTENDENTS, OR EMPLOYEES UNDER WHOM YOU HAVE WORKED, WHO HAVE FIRST HAND KNOWLEDGE OF YOUR CHARACTER, PERSONALITY, SCHOLARSHIP AND TEACHING ABILITY.						
NAME	ADDRESS	PHONE	POSITION				
	250.471.40						
	THE STORY		11.0				
			7				
6.	ATTACH COMPLETE TRANSCRIPTS TO THIS FORM. "ALL PERSONS, FIRMS AND ENTITIES LISTED IN THIS APPLICATION ARE HEREBY AUTHORIZED TO RELEASE ANY INFORMATION OR RECORDS CONCERNING ME TO THE PERSONNEL DEPARTMENT OF HILLDALE PUBLIC SCHOOLS AND I HEREBY RELEASE SAID PERSONS, FIRMS AND ENTITIES FROM ANY LIABILITY AS A RESULT OF THE FURNISHINGS OF SUCH RECORDS AND INFORMATION."						
	"I DO HEREBY CERTIFY THAT TO T ALL OF THE FACTS AND STATEMEN CORRECT AND TRUE."						
	SIGNATURE	DATE	WILL STORY				

(THIS APPLICATION WILL BE CONSIDERED FOR A PERIOD OF ONE (1) YEAR FROM THE DATE RECEIVED IN THE CENTRAL ADMINISTRATION OFFICE OF HILLDALE PUBLIC SCHOOLS. ANY APPLICANT WISHING TO EXTEND THIS TIME MUST REQUEST AND COMPLETE ANOTHER APPLICATION FORM).

HILLDALE PUBLIC SCHOOLS IS AN EQUAL OPPORTUNITY EMPLOYER.