APPLICATION FOR EMPLOYMENT

Pineapple Cove Classical Academy
Palm Bay
West Melbourne
Lockmar

Date Received: _____

General Information

- Answer all questions completely in your handwriting in ink.
- This application was designed for use with various types of job positions. Therefore, some questions may not be completely applicable to the position that you are seeking. However, please answer all questions.
- Please specify the position you are seeking.
- This application will be kept on file for a period of twelve months from the date it is received.

Contact Information

_____
Name (Last) (First) (Middle) (Maiden) Last 4 digits of SS#

_____
Address (Street) City State Zip

_____
Home Phone Other Phone (Cell) Email Addresss

I. Position Preferences

Indicate those areas for which you are qualified and would accept employment:

☐ Principal ☐ Guidance Counselor ☐ Teacher
☐ Assistant Principal ☐ ESE Specialist ☐ Paraprofessional
☐ Registrar ☐ Substitute Teacher ☐ Cafeteria
☐ Office Staff/Attendance ☐ Custodial ☐ Before/Aftercare
☐ Preschool ☐ Bus Driver ☐ Other (please describe) _____

Grade Level Preference (Teacher Applicants):

☐ Primary Education (PK-3) ☐ Elementary (K-6) ☐ Middle (7-8)
☐ High (9-12) ☐ Exceptional Student Education ☐ Other: _____

II. Certification Status

Official sealed transcripts of all college coursework reflecting degree attained and major will be requested prior to a confirmed offer of employment.

I now hold a valid Florida certificate: DOE # _____ Validity Period: _____ to _____

☐ *Temporary* ☐ *Professional* ☐ *FLDOE Eligibility Letter* ☐ *Other (Please Specify)* _____

Subjects shown on certificate: _____

(Please attach a copy of certificate)

I do not hold a Florida certificate but I have been certificated in another State and am eligible to apply for a Florida certificate.

(List status of eligibility) _____

Applicant Name: _____

III. Personal & Background Information

- Are you at least 18 years of age? ☐ Yes ☐ No
- If hired, can you provide verification of your legal right to work in the United States? ☐ Yes ☐ No
- Have you been employed here before? ☐ Yes ☐ No
- List date you would be available for work: _____

Note: A "Yes" answer to the following questions will not automatically bar you from employment. The nature, job-relatedness, severity, frequency and date of offense in relation to the position for which you are applying are considered.

Have you ever had a teaching certificate revoked or suspended? ☐ Yes ☐ No

If "Yes", please explain _____

Have you ever been convicted of a felony, misdemeanor, had adjudication of guilt withheld, or pled nolo contender? ☐ Yes ☐ No

If "Yes", please list offense, date and disposition of the case: _____

_____

IV. Professional & Other Work Experience

Please list the most recent experience first. Indicate all work experience and include military service, self-employment or unemployment. *Previous employer will be contacted for employment history check according to F.S. 1002.33(12)(g)(4).* Use additional sheet(s) if necessary.

Name and Address of School or Business _____

Position Title _____ Dates of Employment _____ to _____

Supervisor's Name _____ Reason for Leaving _____

Telephone Number _____ Starting Salary _____ Ending Salary _____

Name and Address of School or Business _____

Position Title _____ Dates of Employment _____ to _____

Supervisor's Name _____ Reason for Leaving _____

Telephone Number _____ Starting Salary _____ Ending Salary _____

Name and Address of School or Business _____

Position Title _____ Dates of Employment _____ to _____

Supervisor's Name _____ Reason for Leaving _____

Telephone Number _____ Starting Salary _____ Ending Salary _____

Name and Address of School or Business _____

Position Title _____ Dates of Employment _____ to _____

Supervisor's Name _____ Reason for Leaving _____

Telephone Number _____ Starting Salary _____ Ending Salary _____

Name and Address of School or Business _____

Position Title _____ Dates of Employment _____ to _____

Supervisor's Name _____ Reason for Leaving _____

Telephone Number _____ Starting Salary _____ Ending Salary _____

Applicant Name: _____

V. Educational Background

High School _____ Graduated ☐ Yes ☐ No Year Graduated _____

College _____ Major _____ Degree _____ Year _____

College _____ Major _____ Degree _____ Year _____

Other _____ Years Completed _____ Course of Study _____

VI. Personal and Professional References

Provide names and complete addresses (including zip codes) of at least three (3) references. Beginning teachers should list their supervising teacher, college professor(s), and last employer. Experienced teachers should list the names of their last two (2) employment supervisors.

Name _____

Title/Position _____

Address _____

Phone _____

Name _____

Title/Position _____

Address _____

Phone _____

Name _____

Title/Position _____

Address _____

Phone _____

VII. Supplemental Information

Please provide any information that may support your application: e.g. Team Teaching, Awards, Endorsements, Curriculum Writing, etc.

Applicant Name: _____

VIII. Applicant Statement

AUTHORIZATION FOR RELEASE OF INFORMATION

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment, whenever it is discovered.

I understand that if hired to work in a school or other position requiring direct contact with students I shall, upon offer of employment, be responsible for a complete background check including, but not limited to, background checks by the Federal Bureau of Investigation and the Florida Department of Law Enforcement. In addition, I understand that a condition of the application and/or employment process may require a drug test.

I understand that by submitting this application I authorize the employer to conduct verification of my education, previous employment, and work history, now or at any time.

I have read and understand this consent for release of information and I authorize the employer to conduct a background verification screening in accordance with *F.S. 1002.33*. I authorize persons, schools, current and former employers, and other organizations and agencies to provide the information requested, and I hereby release all of the persons and agencies providing such information from any and all claims and damages connected with their release of information.

_____

Applicant's Signature Date

Human Resource Use Only:

Interview Date: _____ Interviewed by: _____

Last Employer Contacted by: _____ Date Contacted: _____ Reference Check on File: ☐ Yes ☐ No