TEACHER APPLICATION SUPPLEMENT

| Name: | | | Date Received: | | |
|---|---------------------------------------|--------------------|----------------|---|--------------------|
| Student Teaching | | | | | |
| Please complete the following employment. | section ONLY | if you | have | e less than 3 years regular full-t | ime teaching |
| Experience – School & Location | | No. of Weeks | | Describe Type of Situation and Work You Did | |
| | | 110010 | | | |
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| | | | | | |
| Student Teaching References: Please include Cooperating Teachers | | | | | |
| Name | Position | | | Mailing Address | Telephone |
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| I hereby represent that each answer to a question herein, and on any attachments to the application, and all other information otherwise furnished is true and correct. I further represent that such answers and information constitute a full and complete disclosure of my knowledge with respect to the question or subject to which the answer or information relates. I understand that any incorrect, incomplete or false statements, or information furnished by me during the selection process will subject me to disqualification from consideration or discharge at any time. I hereby authorize my former employers to give any information regarding my employment with them, and in addition, to furnish any other information they may have concerning me. I understand this Application for Employment and Teacher Application Supplement does not constitute an expressed or implied contract of employment and, if hired, I have the right to terminate my employment | | | | | |
| for any reason at any time. I | also understand e right to unilate | l the p rally c | arish | ed, I have the right to terminate n/school reserves the same righ pe or modify "wage" and "condit | ts. I understand |
| Any offer of employment may obtained by the parish/school | | | | nt will be terminated based on a restigation process. | dverse information |
| Signature of Applicant | | | | Date | |