

# **WARREN COUNTY SCHOOLS**

*Post Office Box 110  
109 Cousin Lucy's Lane  
Warrenton, North Carolina 27589*

*Phone #: (252) 257-3184*

*Fax #: (252) 257-1125*

## **APPLICATION FOR CERTIFIED EMPLOYMENT**

*Warren County Schools is an affirmative action employer  
and does not discriminate by making employment decisions  
based on either race, religious creed, national origin,  
ancestry, physical handicap, sex, or age.*

I. GENERAL INFORMATION

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE/MAIDEN)

CURRENT ADDRESS: \_\_\_\_\_  
(STREET/ROUTE/P.O. BOX)  
\_\_\_\_\_  
(CITY) (STATE) (ZIP) ( ) TELEPHONE NUMBER

PERMANENT ADDRESS: \_\_\_\_\_  
(STREET/ROUTE/P.O. BOX)  
\_\_\_\_\_  
(CITY) (STATE) (ZIP) ( ) TELEPHONE NUMBER

Indicate the position(s) for which you are applying: \_\_\_\_\_

Are you certified in this area? Yes \_\_\_\_\_ No \_\_\_\_\_

Social Security No. \_\_\_\_\_

II. POSITION DESIRED: Check (✓) the appropriate spaces below:

<u>Type of School</u>	<u>Type of Service</u>	<u>Auxiliary Service(s)</u>
_____ Preschool	_____ Regular Teacher	_____ Counselor
_____ Kindergarten	_____ Special Education	_____ Nurse
_____ Elementary	_____ Substitute Teacher	_____ Librarian
_____ Middle School	_____ Administrator	_____ Other
_____ High School	_____	_____
	(Specify)	(Specify)

Elementary: Number in order of preference those grade levels you wish to teach.

\_\_\_\_\_ Kindergarten \_\_\_\_\_ First \_\_\_\_\_ Second \_\_\_\_\_ Third  
\_\_\_\_\_ Fourth \_\_\_\_\_ Fifth \_\_\_\_\_ Sixth

Secondary: List the subjects you are certified to teach and the number of semester hours completed in each.

First \_\_\_\_\_ Semester Hours \_\_\_\_\_  
Second \_\_\_\_\_ Semester Hours \_\_\_\_\_  
Third \_\_\_\_\_ Semester Hours \_\_\_\_\_

Other Subjects you can teach \_\_\_\_\_  
\_\_\_\_\_

III. CERTIFICATION:

Do you hold valid State of North Carolina Credentials? Yes \_\_\_\_ No \_\_\_\_

Certificate Type \_\_\_\_\_ Date of Issue \_\_\_\_\_

Area(s) of Certification: \_\_\_\_\_

Please forward a copy of your current teaching certificate.

IV. NATIONAL TEACHER EXAMINATION: Please consult the enclosed form for qualifying scores.

Have you taken the NTE Core Battery? Yes \_\_\_\_ No \_\_\_\_ (If yes, indicate which test you've taken.)

Communication Skills \_\_\_\_\_ General Knowledge \_\_\_\_\_

Professional Knowledge \_\_\_\_\_ Specialty Area \_\_\_\_\_

(If no, when do you expect to take it?) \_\_\_\_\_

Please contact the NTE Program and have scores mailed to us.

V. EDUCATIONAL BACKGROUND:

INSTITUTION	DATES ATTENDED		ACADEMIC MAJOR	TYPE OF DEGREE	DATE RECEIVED
	FROM	TO			
HIGH SCHOOL			XXX	XXX	
COLLEGE					
COLLEGE					
COLLEGE					

VI. TEACHING EXPERIENCE:

List in chronological order regular teaching experience in public and private schools and in colleges and universities. Begin with present position, if applicable.

CITY/ STATE	SCHOOL DISTRICT	SCHOOL SYSTEM	SCHOOL NAME	GRADE AND/OR SUBJECT	DATES		NO. OF MOS.	SALARY	REASON FOR LEAVING
					MO. & YR. FROM	TO			

Please provide present and/or past Principal and/or Supervisor:



7. Have you ever been convicted of a violation of any law or ordinance or convicted of any crime or misdemeanor other than a minor traffic violation?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, provide details. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If no, please write in your own handwriting the following statement:

"I, (Insert your name), have never been convicted of a violation of any law or ordinance or convicted of any crime or misdemeanor other than a minor traffic violation."

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

IX. ORIGINAL STATEMENT (Must be completed by each applicant):

In your handwriting, please write a brief statement explaining why you chose the teaching profession. Include in your discussion why you selected Warren County.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

READ CAREFULLY BEFORE SIGNING:

I certify that the information supplied in this application is true and correct.

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

(Falsification of any part of this application shall be cause for rejection of application or dismissal.)

I, \_\_\_\_\_, in consideration for employment with Warren County Schools, do hereby expressly authorize the Warren County Board of Education through its designated agent to contact references, verify my record of employment, and investigate my criminal history. I understand that this information is to be used for hiring purposes only and that any unauthorized use of this information is a violation of the Privacy Act of 1974.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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OFFICE USE ONLY

Date of Interview _____	Offer _____	Valid to _____
Interviewed by _____	Salary Class _____	Step _____
Request papers _____	Salary Amount _____	
Papers Received _____		

Instructions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of interview for substitute position: \_\_\_\_\_  
Interviewed by: \_\_\_\_\_



# Warren County Schools

109 Cousin Lucy's Lane  
Post Office Box 110  
Warrenton, North Carolina 27589

Phone: (252) 257-3184  
Fax: (252) 257-5357  
[www.wcsk12.org](http://www.wcsk12.org)

Dear Applicant:

Thank you for your interest in becoming employed by Warren County Schools.

Please complete the enclosed application and return with the following items:

- Copy of College Transcripts or Copy of current NC teaching license
- Copy of PRAXIS scores
- Copy of out-of-state current teaching license

Enclosed are three (3) Requests for Evaluation/Reference forms. You will be responsible for getting the reference forms to those you have listed as references on your application.

Please feel free to contact us at (252) 257-3184 if you have questions.

Sincerely,

*Frank J. Polakiewicz*

Frank J. Polakiewicz, Ed. D.  
Executive Director for Human Resources  
Warren County Schools

**WARREN COUNTY SCHOOLS  
REFERENCE FORM**

\_\_\_\_\_ has applied as a \_\_\_\_\_ with Warren County Schools.  
To assist us in the selection process, you are asked to rate this applicant in the areas outlined below. How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

Use the following ratings:

**1-Unsatisfactory, 2-Adequate, 3-Average, 4-Above Average, 5-Outstanding**  
**How would you rate the applicant on the following?**

Professional Competence	_____	Integrity	_____
Knowledge of skill area	_____	Community involvement	_____
Common sense	_____	Communication skills	_____
Ability to get along with people	_____	Arranges instructional time	_____
Curriculum/instruction	_____	Facilitates instruction	_____
Enthusiasm	_____	Goal accomplishment	_____
Creativity/innovation	_____	Problem-solving skills	_____
Flexibility/receptiveness	_____	Follows through with projects	_____
Presentation	_____	Supervises/evaluates student process	_____
Perform non-instructional duties	_____	Provides instructional feedback	_____
Manages student behavior	_____	Communicates within the educational environment	_____
Use of instructional monitoring	_____		

Please use the space below to comment on the ratings you have given to provide any additional information including strengths and weaknesses you believe would be helpful in evaluating the candidate. Feel free to use the back of this form if necessary.

Do you know of any reason a Board of Education should not consider the candidate for the position of \_\_\_\_\_?

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Signed by: \_\_\_\_\_ Date: \_\_\_\_\_  
Organization: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone number where you can be contacted: \_\_\_\_\_

Please return to:

Warren County Schools  
Personnel Office  
P.O. Box 110  
109 Cousin Lucy's Lane  
Warrenton, NC 27589

DO NOT GIVE TO CANDIDATE