



Houston County Board of Education

PO Box 209
Erin, TN 37061

Phone: 931-289-4148 Fax: 931-289-5543

Support Personnel Application for Employment

I am applying for: (check all preferred)

- | | | |
|--|--|---|
| <input type="checkbox"/> Bus Driver | <input type="checkbox"/> Computer Technician | <input type="checkbox"/> Office/Clerical |
| <input type="checkbox"/> Substitute Bus Driver | <input type="checkbox"/> Custodian | <input type="checkbox"/> School Nurse |
| <input type="checkbox"/> Bus Monitor | <input type="checkbox"/> Educational Assistant | <input type="checkbox"/> Secretary/Bookkeeper |
| <input type="checkbox"/> Coach (sport) _____ | <input type="checkbox"/> Grounds Keeper | <input type="checkbox"/> Security Guard |
| <input type="checkbox"/> Asst. Coach (sport) _____ | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Substitute Teacher* |
| <input type="checkbox"/> Other _____ | | |

**Substitute teachers are hired as-needed throughout the school year and require orientation prior to being placed on duty in a school.*

Please **check** that you have read and agree with the following statements.

- I am a citizen of the United States of America or have obtained the proper work credentials.
- I have not been convicted of a felony in any of the United States.
- I have not been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence, or insubordination.
- I do not have any contagious or communicable diseases, which may endanger the health of schoolchildren.
- I understand my application will remain active and on file for five (5) years after which time it will be purged from the file and destroyed.
- I understand if I am employed, the Board of Education may assign or re-assign me to a specific position as the need requires.
- I understand the misrepresentation of any of the above statements or information on this application may subject me to a fine, loss of opportunity for employment, and/or loss of position if employed.

(signature)

(date)

(printed name)

Last Name: _____ First Name: _____ MI: _____

Current Address: _____
(street)

(city, state, zip)

Phone Number: _____ Email Address: _____

Date Available for Employment: _____
(month, day, year)

Educational Background (in order beginning with high school)

School	Location	Degree	Date	Major

Work Experience (list in order beginning with most recent)

Type of Work	Name and Address of Company or Employer	Date	Last Annual Salary
		From:	
		To:	
		From:	
		To:	
		From:	
		To:	

References (non-family members preferred)

Name/ Title	Relationship (supervisor, colleague/ co-worker, etc.)	Phone Number/ Address

Accommodations

Are there any accommodations you need in order to perform the essential functions of the position for which you are applying? (Optional) Yes No

If so, please explain (use back of form if needed): _____

Houston County Schools does not discriminate on the basis of age, race, color, creed, religion, national origin, or handicap in the operation of its educational programs, activities, and employment practices.