

APPLICATION FOR EMPLOYMENT
PICKETT COUNTY SCHOOLS
141 SKYLINE DRIVE
BYRDSTOWN, TN 38549

Name _____

Address _____ Phone # _____

Soc. Sec. # (Optional) _____ Position Desired _____

Requirements: **Teacher** – Teacher's Certificate
 Substitute Teacher – High School Diploma or GED
 Teacher's Assistant – Associates Degree or pass ParaPro Test
 Bus Driver – CDL License

Please attach copy of requirement. **APPLICATIONS WILL NOT BE CONSIDERED UNTIL A COPY OF REQUIRED CERTIFICATE, DIPLOMA OR LICENSE IS ON FILE.**

Have you ever been convicted of a felony? Yes _____ No _____

EDUCATION

SCHOOL	DATES ATTENDED	HIGHEST GRADE COMPLETED

WORK EXPERIENCE

List Most Recent Employer First

Name, Address of Employer	Dates of Employment	Name of Supervisor

PERSONAL REFERENCE: (Name, Address, Phone Number)

Signature of Applicant _____ Date _____

Applications will remain on file for one year. **PLEASE COMPLETE OTHER SIDE**

**PICKETT COUNTY BOARD OF EDUCATION
141 SKYLINE DRIVE
BYRDSTOWN, TN 38549**

Attachment for Application of Employment with Pickett County Board of Education.

AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

I, _____, do hereby authorize a review of and full disclosure of all records concerning myself to any duly authorized agent of the Pickett County Board of Education, whether the said records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; medical and psychiatric treatment and/or consultation, including the records of hospitals, clinics, private practioners and the U.S. Veterans Administration; employment and pre-employment records including background reports, efficiency rating, complaints and grievances filed against me.

I certify that any person(s) who may furnish such information concerning me shall not be held accountable for giving this information, and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information.

A photocopy of this release will be as valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I understand that any false information given on this application for employment will be grounds for immediate dismissal.

Signature _____

Address _____

An FBI and TBI background check will be required for any person employed by the Pickett County Board of Education. The background check will require a fee of \$ 48.00 to be paid by the employee when he or she is employed. Employment is based upon a positive background check. A negative background check will result in immediate dismissal.

