

Knox County Schools
Andrew Johnson Building

Dr. Charles Q. Lindsey, Superintendent



Human Resources Department
P. O. Box 2188
912 S. Gay Street
Knoxville, Tennessee 37901-2188

Dear Applicant,

Thank you for your interest in the Knox County Schools System.

When we receive your application, we will begin an applicant folder for you. A completed applicant folder includes a copy of your Tennessee Teaching License, transcripts, and signed/sealed reference form(s) (maximum of three). If you are in the process of applying for a Tennessee Teaching License, indicate this in the licensure section on the application form and send a copy of your PRAXIS scores. If you have a Tennessee License, indicate this in the licensure section on the application form and send a copy of your license with your application. You will be contacted by a member of our interview team for a telephone interview.

After December 31st of each year, applications are placed in an inactive file and remain there for one year. If you want your application to remain in the active file, you must notify the Human Resources Department in writing. If you should have a change of name, address, and/or phone number, you must notify Human Resources Department in writing at the above address or FAX to (865) 594-3758.

If you need further information in regard to becoming employed with Knox County Schools contact our offices (865) 594-1932 or (865) 594-1917.

Sincerely,

Vickie A. Field
Human Resources Department

<http://knoxcountyschools.knox.k12tn.net>

Office Use Only							
Computer Code	0	1	2	3	4	5	6 7
URB <input type="checkbox"/>	_____		_____				
	Initial		Date				
SRI <input type="checkbox"/>	_____		_____				
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	Initial		Date				
PRIN <input type="checkbox"/>	_____		_____				
	Initial		Date				

KNOX COUNTY SCHOOLS
P.O. Box 2188
Knoxville, Tennessee 37901-2188
Web Address: <http://www.korrnet.org/kcschool/>

APPLICATION FORM

B.C. 0 5

Date _____

An equal opportunity employer which does not discriminate on the basis of race, sex, color, religion, national origin, age, disability or veteran status in employment opportunities and benefits.

DATE _____

This application form is but one part of our hiring and employment process. Other parts may include an interview, an employment examination/test, and/or a demonstration of an ability to perform the essential functions or duties of the job. If you need an accommodation in order to complete any part of the hiring and employment process, please notify us immediately.

NAME _____
Last First Middle

PRESENT ADDRESS _____
Street

_____ City State Zip

UNTIL _____ TELEPHONE _____

E-MAIL ADDRESS _____

OTHER ADDRESS _____

Street and Address

_____ City State Zip

OTHER TELEPHONE _____

OTHER TELEPHONE _____

GRADE LEVEL OR SUBJECT AREA(S) FOR WHICH YOU ARE APPLYING:

FIRST CHOICE _____

SECOND CHOICE _____

STARTING _____
Date You Will Be Available to Start Work With The Knox County Schools

PRESENT POSITION _____ AT _____
Subject or Grade School and Location

Check Type(s) of Tennessee License(s) Now Held: OOSTT Apprentice (AT) Career Level I Career Level II
(include photocopy) Career Level III Professional Permanent Trade Shop
 Occupational Education

License Number _____ License Issue Date _____ License Expiration Date _____

Subjects Licensed to Teach _____

If you do not have a Tennessee License, have you applied? Yes No If so, when did you apply? _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration status will be required upon employment.

Are you a former Knox County School System employee? Yes No If so, give dates and position:

Have you completed the Automated Teacher Interview? Yes No

If you have previously completed a taped interview (by phone/in person), give year and location (school system):

B. EDUCATIONAL PREPARATION

1. Diploma(s) and/or Degree(s) Earned Including High School:

SCHOOL	CITY AND STATE	MAJOR	DATES ATTENDED		DEGREE
			FROM	TO	

C. PREVIOUS EXPERIENCE

1. Teaching Experience. Starting with your present position, list your professional teaching experience. Do not include student teaching experience or field experience(s).

SCHOOL	SCHOOL SYSTEM AND COMPLETE MAILING ADDRESS	GRADES OR SUBJECTS	DATES OF EMPLOYMENT	
			FROM Month/Year	TO Month/Year

2. Years Teaching Experience in Tennessee _____ Out of State _____
 Dates of Active Military Service: From _____ To _____ Total Years _____
3. Student Teaching; Practicum; Internship; Special Programs Information:
 Name of School _____ School System _____
 Grade or Subjects _____ Dates: From _____ To _____
 Name of Cooperating Teacher(s): _____
 Address of Cooperating Teacher(s) _____

D. PROFESSIONAL REFERENCES

1. Are you registered with a university placement office? Yes No If yes, indicate the following:
 Name of Office _____ Name of Institution _____
 Address _____
2. List below people we may contact concerning your professional preparation and experience. List only persons who know of your training, experience, or other qualifications for educational service.

NAME OF REFERENCE	COMPLETE MAILING ADDRESS/PHONE NUMBER (INCLUDING AREA CODE)	POSITION

E. OTHER PERTINENT INFORMATION

1. If you are appointed to a position in the Knox County Schools, you will be required to furnish the following information and materials:
 The Superintendent's Copy of your current, valid Tennessee Teachers License(s)
 Verification of all prior teaching experience and active military service (Form DD-214)
 Official transcripts of all college or university courses
 Some of the above information will be used to determine your salary and all information will become a part of your personnel record.
2. What co-curricular or extra-curricular activities are you willing to direct or coach?

The Knox County School System is an Equal Employment Opportunity Employer

Knox County Schools does not discriminate on the basis of race, sex, color, religion, natural origin, age or veteran status in the educational programs and activities it operates, pursuant to Title IX of the Educational Amendment of 1972; Public Law 92-318, Section 504 of the Rehabilitation Act of 1973; Public Law 92-112; and Title VI of the Civil Rights Act of 1964. Complaints of discrimination on the basis of sex or disability may be directed to Section 504 Compliance Coordinator, Room 909 of the Andrew Johnson Building, telephone (865)594-1540. Complaints of discrimination on the basis of race, color, religion, national origin, age or veteran status may be directed to Title VI Coordinator, Room 1607 of the Andrew Johnson Building, telephone (865)594-1686.

F. THE FOLLOWING INFORMATION IS REQUIRED BY LAW BY THE STATE OF TENNESSEE.

***Be sure you underline the appropriate response in items 2 & 3 below.**

1. I recognize that, if I am employed, the board of education of the said school system will assign or reassign me to a specific position as the need requires.

*2. I hereby certify that I **(have)** **(have not)** been convicted of a misdemeanor or a felony in any state of the United States. **(*Knowingly falsifying information required by Sec. 49-5-406 (a)(1) shall be sufficient grounds for termination of employment and shall also constitute a Class A misdemeanor which must be reported to the District Attorney General for prosecution.)**

If "have" is indicated, explain fully the details of each such conviction on a separate sheet of paper.

*3. I further certify that I **(have)** **(have not)** been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence, or insubordination as the same are defined in Section 49-5-501 of the Tennessee Code.

If "have" is indicated, explain fully the details of each such dismissal on a separate sheet of paper. The employer's non-renewal of a yearly contract need not be indicated unless the non-renewal was for cause as listed above.

4. I hereby certify that my resignation with my present employer was or will be submitted at least 30 days prior to the beginning date stated. If my resignation has not or will not be submitted 30 days prior to the date stated, I certify that any board of education that employed me has waived its right to a 30 days' notice. A copy of my letter of resignation or of the said board action is attached or will be provided. (This applies if you are or were employed by another Tennessee public school system and if your termination is or was voluntary.)

5. I understand that misrepresentation of any of these certifications may subject me to the penalties prescribed in Sections 49-5-406, 49-5-407 and 49-5-411 of the Tennessee Code.

G. APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Information may be verified by fingerprint sample, a criminal history records check conducted by the Tennessee Bureau of Investigation, or other records check pursuant to Tennessee Code Annotated, Section 49-5-413. I understand the local Board of Education may require an applicant to pay such costs if the applicant is offered and accepts a position as a teacher or any other position requiring proximity to school children.

*After December 31 of each year, applications are placed in an inactive file and remain there for one year. If you want your application to remain in the active file, **you must** notify the Department of Human Resources in writing.*

The applicant understands that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Date

Signature of Applicant

APPLICATION PROCEDURES

As a part of the Knox County School System Affirmative Action Plan, vacant positions are advertised on the Human Resources Bulletin Board in the lobby of the Andrew Johnson Building between June and the beginning of each school year. Interim and temporary positions which occur during a school year are not advertised.

You will be considered for any certified vacant position (advertised and non advertised) for which you are licensed and have a completed application on file.

INTERVIEWS WILL BE INITIATED AND SCHEDULED BY THE DEPARTMENT OF HUMAN RESOURCES.

A completed application includes:

1. Transcript
2. Placement Office data if available
3. Photocopy of Tennessee Teacher License (Superintendent's Copy with code numbers)
4. **Copy of appropriate Praxis testing requirements for issuance of a Tennessee Teaching License (Principles of Learning and Teaching (PLT) and/or Speciality Area)
5. Sealed/Signed Reference Form(s) (maximum of three) – It is your responsibility to return these forms to Knox County Schools.

After December 31 of each year, applications are placed in an inactive file and remain there for one year.

If you want your application to remain in the active file, you must notify the Department of Human Resources in writing.

**Applicable to new graduates or out-of-state educators applying for a Tennessee License

KNOX COUNTY SCHOOLS

APPLICANT CARD

Date _____ Social Security Number _____

Name _____
Last First Middle

Address _____
City State Zip

Telephone () _____

Grade or Subject _____

Do you have Tennessee License? Yes, Teacher Number _____ No Applied For

Type of License _____ Issue Date _____ Expiration Date _____

Endorsements _____

Experience _____

Complete and return this card with your application.

HR-108 (12/96)

KNOX COUNTY SCHOOLS

EMPLOYMENT QUESTIONNAIRE

Discrimination in the Knox County School System is prohibited under various State and Federal statutes. Knox County Schools is an equal opportunity employer which does not discriminate on the basis of race, sex, color, religion, national origin, age, disability or veteran status in employment opportunities and benefits.

The information solicited on this form is requested on a voluntary basis and will be kept confidentially separate from all other employment records. I do not wish to provide the information requested.

Name *(please print)* _____ Date _____

Date of Birth _____ Social Security Number _____

CHECK ALL APPROPRIATE ITEMS:

- Male Female
- White Pacific Islander American Indian, Eskimo, or Aleut
- Asian Black or African American Hispanic or Latino Other _____
- Disabled Veteran
- Vietnam ERA (8/5/64-5/7/75)
- Disabled (service related)

HR-100/Supplement-2 (12/96)

**KNOX COUNTY SCHOOLS
CONFIDENTIAL
PROFESSIONAL REFERENCE FORM**

APPLICANT: I authorize any current or former employer, person, firm, corporation, educational or vocational institution, or government agency to provide Knox County Schools with information they have regarding me. I hereby release and discharge those who provide information from any and all liability as a result of furnishing and receiving this information. I agree that references and personal information which become a part of this application will be regarded as confidential and shall not be revealed or disclosed to me. I understand I am responsible for obtaining this form and forwarding it to Knox County Schools Human Resources Department.

Applicant Name – Please Print _____ Applicant Signature Required _____ Date _____

REFERENCE: The above named person has applied for a certificated position with Knox County Schools. We ask that you carefully evaluate the applicant in terms of your knowledge of the applicant as an employee or through other professional contacts. Please complete this form and return it directly to the applicant in a sealed envelope with your signature across the sealed area. The applicant will, in turn, submit the reference form to our office with other application information. Thank you for assisting us in evaluating this applicant.

NOTE: Please rate the applicant in each of the following categories by comparing this individual with others of comparable training and experience.	Upper 10%	Upper 25% but not Upper 10%	Upper 50% but not Upper 25%	Lower 50% but not Lowest 10%	Lowest 10%	No basis for judgment
1. Flexibility Willingness to learn new concepts or ways of doing things. Cooperativeness with youth and adults. Democratic approach to teaching.						
2. Commitment to Accomplishment Exertion of effort to attain particular goals. A desire for producing results. Organization of ideas, time, materials, and space in such a way that accomplishment occurs.						
3. Enthusiasm Displays overall optimism and zeal for what one is doing. Willingness to be involved. Enthusiasm develops positive interpersonal relationships with others.						
4. Clarity of Expression Understands and correctly interprets concepts presented or discussed. Presents and discusses concepts precisely, answers questions clearly.						
5. Scholarship and Conceptual Skills Needed for substantive and methodological aspects of teaching. This includes the ability to learn new ideas and skills.						
6. Relation to Students Ability and willingness to develop favorable relationships with students. Exhibits listening patience, caring and liking for students. Shows empathy for students, is interested in their learning and welfare; is responsive to student needs; is accepting of students and has a high regard for them as they are; is open and desires to have strong relationships with students.						
7. Professional Orientation Has knowledge of current approaches to teaching; breadth of background and willingness to use this background for the benefit of school; willingness to work with others in a team or faculty situation. In general, exhibits a high interest in students, but also maintains high interest in working out problems for the satisfaction of all involved.						
8. Modeling Appropriate Behavior Dress, appearance, courteousness, and behavior of individual.						

Comments: _____

Name of Evaluator _____ Telephone () _____

Evaluator's Title _____ Company or Organization _____

Observation from _____ to _____. Applicant's position during this evaluation period: _____

Have you observed this applicant: very few times? equal to one year? several years?

If the applicant were applying to you for a similar position, would you employ this person? yes no

Date _____ Signature _____