# **Kerr-Vance Academy**

### **Faculty Application**

Personal Data		
Last Name	First Name	MI
Present Address	City/State	Zip Code
Home Phone Number	Cell Pho	one Number
Teaching Position Desired (If lower school, specify grade   content area.)	evel/subject area. If middle school,	/upper school, specify
1)	2)	

## **Educational Employment**

List only full-time positions held for six months or longer.

Inclusive dates from-to	Immediate Supervisor	Address	Position	Reason for leaving
	,			

#### **Personal References**

Name/Title	Phone Number	Address	City/State/Zip

Educational Background (List degree(s) earned and conferring college/university.)

Degree	College/University	City/State	Dates Attended

### Certification Information

Certified teachers: Please complete the box below with the information on the teaching certificate. Please include a copy of the certificate.

Imminent Graduates: Have you or will you be recommended for a teaching certificate?

\_\_\_\_\_\_ If so, complete the box as though you held a teaching certificate.

State Certified	Date of Expiration	Level of Certification	Elementary Area of Concentration	Secondary Teaching Fields	Endorsements
		,			

Professional Addendum (List scholarships, honors, awa	rds, or assistantships.)
(List workshops or institutes attended within the last five years)	
Otto - n Data	
Other Data	
If you answer yes to any of the following, please provide de	tails on a separate sheet.
Have you had a serious or physical illness, major surgery or the performance of your duties?	sustained injury which could impede
Do you have a chronic health condition which could impede	e the performance of your duties?
Have you ever been convicted of a felony or a crime involving such crimes as fraud, swindling, and sex related offenses. You convictions that have been set aside after successful complete.	ou may omit juvenile offenses or
If the answer is yes, please give details relating to the date conviction, the court in which convicted, the case number,	
Kerr-Vance Academy	
700 Vance Academy Road, Henderson, NC 27537 252-49	2-0018
I, the undersigned, affirm that the information included in to I understand that the failure to include true and complete it disqualification for consideration for employment and/or dischool. I also understand that the references and personal this application are regarded as confidential and shall not be	nformation may result in my ismissal from my position in this information which become a part of
Signature	Date

All personnel of Kerr-Vance academy shall be employed without regard to race, color, religion, sex, or national origin.