# Franklin Phonetic School

6116 State Route 69

Prescott Valley, Arizona 86314

928-775-6747

## Certified Teacher Employment Application

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |  | | | | Date: | | | |  | | | | |
| Last | | | | | | | | | | | | | | | | | | | First | | | | | | | | | | | | | | | | | M.I. | | | | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Street Address | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | | | | | | | |
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| City | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | State | | | | | | | ZIP Code | | | | | |
| Phone: | (     ) | | | | | | | | | | | | | | | | | | | | | E-mail Address: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Date Available: | | | | | |  | | | | | | | | Social Security No.: | | | | | | | |  | | | | | | | | | | | | | Desired Salary: | | | | | | | $ | | | | | | |
| Position Applied for: | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | | | | YES | | | | NO | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | | | | | | YES | NO |
| Have you ever worked for this company? | | | | | | | | | | | | | | | | | YES | | | | NO | | If yes, when? | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | | | | | YES | | | | NO | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| If yes, explain: | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School: | | | | |  | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
| College: | | | |  | | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
| Other: |  | | | | | | | | | | | | | | | | | | | Address: | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | To: | | | |  | | | | Did you graduate? | | | | | | | | | | YES | | NO | | | | | | Degree: | | | | |  | | | | | | | | | |
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| References | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three professional references. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | | |
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| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | (     ) | | | | | | | | | |
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| Full Name: | | | |  | | | | | | | | | | | | | | | | | | | | Relationship: | | | | | |  | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | (     ) | | | | | | | | | | |
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| Previous Employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
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| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
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| Company: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Phone: | | | | | | | | | | (     ) | | | | | | | | | |
| Address: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor: | | | | | | | | |  | | | | | | | | | | |
| Job Title: | | | |  | | | | | | | | | | | | | | Starting Salary: | | | | | | | | | $ | | | | | | | | | | Ending Salary: | | | | | | | | | $ | | |
| Responsibilities: | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From: |  | | | | | | | | | | To: | |  | | | | Reason for Leaving: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | | | | YES | | | | | NO | | | | | | |  | | | | | | | | | | | | | |
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| Office Use  Leave blank | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | |
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| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date: | | |  | | | | | | | |
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**Student Teaching Experience**

Dates Name of School Location Grades or Subjects Taught

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

**Teaching Experience** (list most recent first)

Dates Name of School Location Grades or Subjects Taught

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

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

List any activities, interest or organizations that you participate in: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The space provided below is for more detailed information as to you qualifications to teach, direct or coach any one or more of the activities you are applying for. You may present any additional information you have not already included elsewhere on this application.

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

What is your Philosophy regarding discipline?

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How do you deal with parents who have a difficulty with classroom practices?

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What methods of reading construction do you currently use?  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Before final consideration is given for employment, the candidate must have on file in the personnel office a complete set of transcripts, as well as placement and proof of a current Arizona certification. It is the responsibility of the candidate to see that transcripts and placement file are provided. Out of state candidates should write to the Arizona State Department of Education, 1535 West Jefferson Street, Phoenix, Arizona 85007, regarding Arizona State Certification.

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