

**APPLICATION FOR EMPLOYMENT**



**Nicholas County Schools**

Mr. Gregory A. Reid, Superintendent  
395 West Main Street  
Carlisle, Kentucky 40311  
(859) 289-3770 Phone  
(859) 289-3777 Fax

PLEASE CHECK POSITION DESIRED:

- Certified Teacher/Administrator  
Area: \_\_\_\_\_
- Secretary
- Bookkeeper
- Maintenance/Grounds
- Mechanic
- Child Care
- Preschool
- Cafeteria
- Custodial
- Bus Driver
- Family Resource
- Paraeducator
- Substitute Teacher
- Other \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Please check the appropriate answer:

If you are presently employed, what type of contract do you have with your present employer?

Limited                       Continuing                       Other

Are you a citizen of the United States?    Yes                       No

Have you ever been dismissed, fired, or discharged from a position of employment based on the claim of misconduct or unsatisfactory performance?    Yes                       No

Have you ever been asked to resign from a position of employment based upon the claim of misconduct or unsatisfactory performance?    Yes                       No

Have you ever been convicted of a felony?    Yes                       No

EDUCATIONAL PREPARATION

School	Name/Location	Full Years Attended	Year of Graduation	Major Area of Study
High School/GED				
Associate/Bachelor				
Masters				
Rank I/ Ed.S./ Ed.D.				

WORK EXPERIENCE

Employer	Period of Employment	Job Title	Address	Supervisor/ Phone Number

CERTIFICATION

Do you presently hold a valid Kentucky Teaching Certification? YES  NO

Do you presently hold a Commercial Driver's License? YES  NO

Please list all industry/professional certifications you hold:

Type (i.e. Standard, Provisional, Eligibility for Internship, etc. )	Area	Expiration Date

REFERENCES

	Name and Title	Address, City, State	Phone
PROFESSIONAL			
PROFESSIONAL			
PROFESSIONAL			
PERSONAL			
PERSONAL			

In the space below, write a BRIEF autobiography:

I authorize the Nicholas County Board of Education to make a full and complete investigation given in this application, and also consent to representatives of the Nicholas County School District contacting references, previous employers and schools attended. I understand that a condition to employment will be a criminal records background check as required by KRS 156.483. Any false statements or omission of any information requested shall be reason for non-employment or dismissal from employment. If employed, I agree to abide by the policies set forth by the Nicholas County Board of Education.

I understand that this application will be kept on file for a period of one (1) calendar year from the date it is filed. I also understand that it is my responsibility to update the information contained in this application and to provide the District with those documents required for employment in a timely fashion.

I certify that the information given herein is true and complete to the best of my knowledge.

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Applicant's Signature

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Date