CANNELTON CITY SCHOOLS 109 S. 3rdStreet, Suite A Cannelton, IN 47520 812-547-2637

FAX: 812-547-4142

APPLICATION FOR EMPLOYMENT

NAME (Last)	(First)	(Middle)
Home Address (Street)		
City, State, Zip Code		
Home Telephone Number	Alternate Phone	Number
Business Address (Street)		
Business Telephone Number		
Current Position		
Name of School District or Organization		
Length of Service: Current Corporation	years Current P	osition years
Number of Students Enrolled	Number of Certi	fied Staff
Number of Schools and Levels or Grade Con	figurations	
Assessed Valuation of District		
District Annual Budget		
Normal are of Tanahara Dasponsible to you	Ad	ministrators

Do you hold a valid	Indiana Superinter	ndent's License?	-		
License Number	140.000	Expir	ation Date	_	
Do you hold a valid	Indiana Teacher's	License?			
License Number	,	Expi	ration Date		
What other valid In	diana certificates d	lo you hold?			
Current Contractua	l Relationship				
Length of Present C	ontract		Expiration	Date	
Date Available			Current S	alary	
Should this applicat	ion be treated as co	onfidential with	your curren	t employer?	
EDUCATION					
High School Name		Location		Date of C	Graduation
College/University	Dates Attended	Location	Major/Mi	nor Degree	Date
Professional Experi	ence and/or Emplo	oyment (Begin w	ith most cur	rent)	
Position	Organization		Size	D	ates
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Name Name Name Recognition, H	Position Position Position	Address	Telephone Number(s) Telephone Number(s)
Name		Address	Telephone Number(s)
	Position		
Recognition, H		Address	Telephone Number(s)
	lonors, Awards, and	Publications	
Professional A	ssociations and Activ	<u>rities</u>	
Community A	ctivities		
Community 12			
Background I			ted or under a procedure to