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|  | ***Building 6, Room 264***  ***1900 Kanawha Boulevard, East***  ***Charleston, WV 25305-0330***  ***Phone: (304) 558-2702 Fax: (304) 558-0216***  ***http://wvde.state.wv.us/hr/*** | **INSTRUCTIONS**:   * Complete and return this application (REQUIRED). * Provide copy of unofficial transcripts/Degree (REQUIRED). * Provide copy of unofficial Teaching Certificate (IF REQUIRED). * Provide resume and letters of recommendation (OPTIONAL). |

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| **APPLICATION FOR EMPLOYMENT** | **(Office Use Only)** |
| **Date Received:** |

**PLEASE PRINT OR TYPE ALL SECTIONS**

***It is the responsibility of the applicant to communicate all relevant information concerning the applicant’s qualifications.***

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| **PERSONAL** | Last Name: | | First: | | Middle: | | | Maiden: | |
|  | Present Address: | | | | | Home Phone: (   )    - | | | Other: (   )    - |
|  | City: | | State: | Zip Code: | | Social Security Number: | | | |
|  | Title of Position Applying For: | | | | | | | | |
|  | Type of Position Applying For: | Professional  Associate  Service Position  Summer Only  Temporary/Part-Time | | | | | | | |
|  | Have you ever been employed with the West Virginia Department of Education?   Yes  No  If yes, explain. When?       Where? | | | | | | Other name(s) on records: | | |
|  | Are you under contract to another agency or employer?  Yes  No  If yes, please explain. | | | | | | | | |
|  | Have you ever been dismissed or asked to resign from any employment?   Yes  No  If yes, enclose full explanation. | | | | | | | | |
|  | Are you a citizen of the United States?   Yes  No | | | | | | | | |

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| **EDUCATION** | What is your highest level of education attained?  High School Diploma  GED  Associate Degree  Bachelor’s Degree (AB/BA/BS)  Bachelor’s+15 add. sem. hrs.\*  Master’s Degree (MA/MS)   Master’s+15 additional semester hrs.\*   Master’s+30 add. sem. hrs.\*   Master’s+45 add. sem. hrs.\*  Doctor of Education (Ed. D)  Doctor of Philosophy (Ph. D)  Doctorate (Other):  \**+15,+30,+45 denotes additional semester credit hours above the degree obtained.* | | | | | | | | | | |
|  | Do you hold a valid West Virginia Teaching Certificate or any other license or certification?  Yes  No | | | | | | | Year and Type: | | | |
|  | Do you hold a valid Teaching Certificate or any other license or certification in another state?  Yes  No  If yes, identify state(s), Years and Type: | | | | | | | | | | |
|  | Has your teaching license ever been denied, suspended, or revoked following allegations of misconduct?  Yes  No  If yes, enclose full explanation and documentation. | | | | | | | | | | |
|  | High School(s) Attended | Name and Address of Institution: | | | | Dates | | | Diploma | | |
|  |  |  | | | |  | | | Yes -  No | | |
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|  | College(s) Attended *(attach additional pages if needed)* | Name and Address of Institution: | | Major | | Minor | | | Dates | | Degree |
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|  | Relevant Specialized Training |  | | | | | | | | | |
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| **WORK EXPERIENCE** | **Beginning with your current/last position, list in chronological order your work experience. (Attach additional pages if needed.)** | | | | | | | | | | |
|  | Position/Title | | Address/Location | | Dates | | Supervisor Name | | | Phone | |
|  |  | |  | |  | |  | | | (   )    - | |
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| **REFERENCES** | Name/Position or Title | Mailing Address | Phone |
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| **BACKGROUND CHECK** | **A criminal record check by fingerprinting is required for employment by the West Virginia Department of Education. Failure to truthfully answer these application questions and fully disclose any modifications to the information provided throughout the hiring process will result in denial of employment.** | |
| **If you answer yes to any question below, SUBMIT a narrative with your application.** The narrative should include dates, locations, school systems, and all/any other information that explains the circumstance(s) in detail. | |
| 1. Have you ever had adverse action taken against any application, certificate, or license in any state? Adverse action includes but is not limited to the following: letter of warning, reprimand, denial, suspension, revocation, voluntary surrender or cancellation. | Yes  No |
| 1. Have you ever been disciplined, reprimanded, suspended, or discharged from any employment because of allegations of misconduct? | Yes  No |
| 1. Have you ever resigned, entered into a settlement agreement, or otherwise left employment as a result of alleged misconduct? | Yes  No |
| 1. Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency? | Yes  No |
| 1. Have you ever been the subject of a formal inquiry, review or investigation of alleged misconduct while employed in an educational or school-related position? Have you resigned an education-based position when you had reason to believe an investigation for misconduct was underway or imminent? | Yes  No |
| 1. Have you ever been arrested, charged with, convicted of, or are currently under indictment for a felony?\* | Yes  No |
| 1. Have you ever been arrested, charged with or convicted of a misdemeanor? (For the purpose of this application, minor traffic violations should not be reported.) Charges or convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI) must be reported.\* | Yes  No |
| \* For a YES response to items 5 & 6, the following must be included for all charges, including those that have been dismissed or expunged: 1) Judgment Order; **OR** 2) Final Order; **OR** 3) Magistrate Court Documentation; **AND** 4) all other relevant court documentation.  **NOTE: An affirmative answer will not automatically disqualify you from being considered as a candidate for employment.** | |

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| **SIGNATURE** | The information provided in this application for employment is true, correct, and complete.  I have completed this application with the knowledge and understanding that any or all items contained herein may be subject to investigation, and I consent to the release of information concerning my capacity and fitness by employers, educational institutions, law enforcement agencies and other individuals and agencies. I understand that if I am employed, any misstatement, omission of fact, or failure to disclosure modifications to information on this application may result in my dismissal.  By affixing the date, my name/signature, and the last four digits of my social security number I agree this is a legally binding signature. | | | | | | | |
|  | Date: |  |  | Applicant Name/Signature: |  | Four Digit Soc. Sec. |  |  |
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| **WEST VIRGINIA DEPARTMENT OF EDUCATION**  Department of Education staff are employed upon recommendation of the state superintendent of schools and are state employees. No representative or employee of the state is authorized to enter into any employment contract or other agreement. Department staff work under the direction of the state superintendent of schools for the general supervision of the free schools in the state and implementing the policies of the board and other necessary tasks as determined by the state superintendent or his/her designee. Each employee is “at-will” and subject to termination by the state superintendent at any time, with or without notice, cause or compensation.  The employment relationship between the state superintendent and the employee may be terminated by either party. Reasons for termination by the state superintendent include, but are not limited to, immorality, incompetency, cruelty, insubordination, intemperance, willful neglect of duty, unsatisfactory performance, the conviction of a felony or a guilty plea or a plea of no contest to a felony charge, misuse of funds or property, violations of law or policies of the state board, lack of need, or a lack or loss of funding.  *The West Virginia Department of Education is an equal opportunity employer and applicants for employment are considered solely on the basis*  *of individual qualification and merit without regard to age, gender, race, color, religion, disability, or national origin.* |

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| **West Virginia Department of Education**  **EQUAL EMPLOYMENT OPPORTUNITY**  **QUESTIONNAIRE**  **wvde.hr@k12.wv.us** |

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| **Anti-Discrimination Notice**. It is an unlawful employment practice for an employer to fail or refuse to hire or discharge any individual, or otherwise to discriminate against any individual with respect to that individual’s terms and conditions of employment, because of such individual’s race, color, religion, sex, or national origin. |

We are an organization that values diversity and encourages women and minorities to apply. For this reason, we invite you to indicate your gender and race/ethnicity below. The following information will be used solely to evaluate recruitment and examination methods.

The West Virginia Department of Education (WVDE) is subject to certain nondiscrimination and affirmative action recordkeeping and reporting requirements which require the employer to invite employees to voluntarily self-identify their race/ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes.

If you choose to voluntarily self-identify, you may mark only one of the boxes presented below. Please enter only one number or mark per block – do not use dashes or other punctuation or symbols.

**Your cooperation is essential for us to ensure equal employment opportunity for all job applicants.**

**PLEASE PRINT OR TYPE ALL SECTIONS**

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| **Personal** | Last Name: | | First: | Middle: | Maiden: |
| Present Address: | | | | |
| City: | | State: | | Zip Code: |
| Title of Position Applying For: | | | | |
| Type of Position Applying For: | Professional  Associate  Service Position  Seasonal Only  Temporary/Part-Time | | | |
| *Please mark your referral source:*   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | |  | ***WVDE Website*** |  | ***Monster.com*** |  | ***Simplyhired.com*** |  | ***Professional Publication*** | |  | ***Newspaper*** |  | ***LinkedIn.com*** |  | ***Job.com*** |  | ***Walk-In*** | |  | ***WVDE Employee*** |  | ***Indeed.com*** |  | ***edweek.org*** |  | ***Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | | | | |

**INVITATION TO SELF-IDENTIFY**

PLEASE ANSWER THE FOLLOWING QUESTION

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| **Gender** | ***Check if the following is applicable:*** |
| Male  Female  **I do not wish to disclose** |

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| **Race/Ethnicity** | ***What is your race/ethnicity? Please mark the one box that describes the race/ethnicity category with which you primarily identify.*** | |
|  | **Hispanic or Latino**: *a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.* |
|  | **White** (Non-Hispanic/Latino): *a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.* |
|  | **Black or African American**: *a person having origins in any of the black racial groups of Africa.* |
|  | **Asian**: *a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.* |
|  | **American Indian or Alaska Native**: *a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.* |
|  | **Native Hawaiian or Other Pacific Islander**: *a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.* |
|  | **Two or More Races**: *a person who primarily identifies with two or more of the above race/ethnicity categories*. |
|  | **I do not wish to disclose.** |

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| **Veteran Status** | ***Check if the following is applicable:*** | |
|  | **Veteran** *-* As defined under one or more of the following:   * *served on active duty for a period of more than 180 days, and any part of which occurred between August 5, 1964 and May 7, 1975 and were discharged or released other than dishonorably; or, was discharged or released from active duty for a service connected disability if any part of the active duty was performed between August 5, 1964 and May 7, 1975; or* * *who served on active duty in the U.S. military, ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge has been authorized (such as The Persian Gulf, El Salvador, Grenada, Lebanon, Panama, Southwest Asia, Haiti, Somalia & Bosnia); or* * *one who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of discharge or release from active duty (recently separated veteran).* |
|  |  | **I do not wish to disclose.** |

**PLEASE RETURN FORM TO:** [**wvde.hr@k12.wv.us**](mailto:wvde.hr@k12.wv.us)

**or**

***Building 6, Room 264***

***1900 Kanawha Boulevard, East***

***Charleston, WV 25305-0330***