



NEWARK CHARTER SCHOOL TEACHING APPLICATION

Newark Charter School
2001 Patriot Way
Newark, Delaware 19711
phone 302 369 2001 | fax 302 368 3460 |
e-mail gmeece@ncs.k12.de.us

Name _____
Last First Middle

Address _____

Home Phone _____ Cell _____ E-mail _____

POSITION FOR WHICH YOU ARE APPLYING

___ Kindergarten

___ Elementary School Teacher (Generalist, grades 1-4)

___ Elementary School Teacher (Specialist, grades 1-4)
List specials area (e.g., special education, art, music, physical ed., library, technology, etc.)

___ Middle School Teacher (grades 5-8)

Grade Preferred: _____ Subject Preferred (*usually the area in which you are certified*): _____
1st choice: grade _____ 1st choice: _____
2nd choice: grade _____ 2nd choice: _____
3rd choice: grade: _____

Do you hold a valid teaching certificate? Yes _____ No _____ If yes, indicate State _____

Field _____ Type _____

*If you hold a Delaware Certificate, please enclose a copy.

Have you taken the Pre-Professional Skills Test? (please enclose a copy)
_____ Yes _____ No Date Taken _____

Are you "Highly Qualified" according to the regulations set forth under NCLB?
_____ Yes _____ No In what area? _____

Are you a National Board Certified Teacher?
_____ Yes _____ No In what area? _____

EDUCATIONAL PREPARATION

School	Dates Attended To:	From:	Degree
High School			

The Newark Charter School is an equal opportunity employer. It does not discriminate on the basis of race, color, religion, national origin, sexual orientation, marital status, disability, age or Vietnam Era veteran's status in employment or its programs or activities.

TEACHING EXPERIENCE

Starting with your present position, list all teaching experience for which you have been or are being paid.

School	City and State	Grade/Subject	Full or Part Time	Dates

REFERENCES

Please list persons whom we may contact for information concerning your professional preparation and competence. Do not list relatives or persons who know you only as a friend or who can evaluate only your personality and character. List your classroom cooperating teacher if your student teaching was done within the last three years. Complete mailing address must be included.

Position	Name	Mailing Address	Telephone

THIS APPLICATION IS NOT COMPLETE WITHOUT A SIGNATURE BELOW.

I hereby authorize the Newark Charter School to request verification of statements made by me on the employment application. I also give permission to any of my former employers to release the information requested to the Newark Charter School. Further, I release such employers and the Newark Charter School from all liability for any damage whatsoever for issuing such information. I certify that all statements made on this application are true and complete to the best of my knowledge and that any false statements or withholding any information could subject me to disqualification or dismissal.

Applicant's Signature

Date

Send hard copies of a cover letter, resume, teaching certificate, and a completed teaching application to:

School Director
Newark Charter School
2001 Patriot Way, Newark, Delaware 19711
302-369-2001 (Phone)
302- 368-3460 (Fax)