

ORANGE COUNTY SCHOOLS  
200 East King Street  
Hillsborough, North Carolina 27278  
Website: [www.orange.k12.nc.us](http://www.orange.k12.nc.us)  
Telephone: (919) 732-8126  
Fax: (919) 732-8120

### **Application Procedures: Certified Personnel**

Orange County Schools is appreciative of your interest in employment with the system and invites you to file a completed application with the Personnel Office. Teaching candidates must have or be eligible for a North Carolina teacher's license. Requirements for licensure and an application for a North Carolina license may be secured by writing to:

N.C. Department of Public Instruction  
Licensure Section  
6365 Mail Service Center  
Raleigh, North Carolina 27699-6365

In completing the system's application for employment, it is important that you follow specific procedures. A completed application packet consists of:

- Application Form
- Resume (optional)
- Copy of N.C. teaching license or a N.C. Statement of Eligibility and/or Out of State teaching license(s)
- Official transcripts of all college and university work with graduation dates and degrees awarded-photocopies acceptable.
- Minimum of three sealed letters of reference (forms enclosed for your use). Letters of reference and/or College Placement Folder may be substituted.
- Copy of PRAXIS scores (if taken)
- Signed Criminal Records Check Form
- Copy of Social Security Card and Driver's License

Please send the completed application to:

Orange County School System  
Human Resources Department  
200 East King Street  
Hillsborough, North Carolina 27278

A completed application remains in the active file for one year. All applications one year old or older may be discarded unless the candidate reactivates the application by letter or phone by the end of the calendar year in which the applicant applies.

Your application will be considered as vacancies occur in your area. However, we do not contact candidates for interviews unless projected vacancies or actual vacancies occur. Please advise us of any change of address, phone number, or certification status.

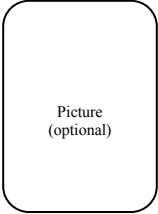
Interviews are scheduled with the Associate Superintendent for Human Resources, principals, supervisors or school based interview teams. All staff is approved by the Board of Education upon recommendation of the Superintendent of Schools.

A physical examination is required of all new employees in North Carolina.

Thank you for applying to Orange County Schools.

# APPLICATION FOR EMPLOYMENT

**ORANGE COUNTY SCHOOLS**  
200 East King Street  
Hillsborough, North Carolina 27278



Name \_\_\_\_\_ Date \_\_\_\_\_  
(Last) (First) (Middle)  
Present Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_ Until \_\_\_\_\_  
(Street) (City/State/Zip)  
Permanent Address \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
(Street) (City/State/Zip)  
Telephone (Work) ( ) \_\_\_\_\_ Until \_\_\_\_\_ Email Address: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_ -- -- Earliest Possible Employment Date: \_\_\_\_\_

**POSITION DESIRED** (Applicant must be licensed or eligible for licensure in area(s) of choice) . Please mark first choice 1, second choice 2, etc.

**ELEMENTARY** Grades Pre-K – 5

Pre-Kindergarten  Kindergarten  Primary (1-3)  Intermediate (4-5)

**MIDDLE SCHOOL** Grades 6-8 Area(s) of Certification: \_\_\_\_\_

What subjects could you most effectively teach on a departmentalized or team basis?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**HIGH SCHOOL** Grades 9-12 List in order of preference the subjects you are licensed to teach.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**SPECIALIST** Indicate below the area(s) in which you are licensed and seek assignment.

Art  Music  Physical Education  Media Specialist  Counselor  Social Worker  
 Other \_\_\_\_\_

**ADMINISTRATIVE**  
Position Applying For \_\_\_\_\_

**TESTING REQUIREMENT** – The National Teacher Examination (NTE)/PRAXIS Series Tests are required for all applicants including those from states having reciprocity agreements with North Carolina.

Have you taken Praxis II Examination(s)? (Required 7/1/98) Yes  No  If yes, when? \_\_\_\_\_

Praxis II Subject Assessment scores \_\_\_\_\_

Have you taken NTE Examination(s)? (Required thru 6/30/98) Yes  No  If yes, when? \_\_\_\_\_

Professional Knowledge score \_\_\_\_\_ Area score \_\_\_\_\_

If you have never been issued a N.C. teaching license, please attach a copy of your NTE/PRAXIS scores. NTE/PRAXIS scores may be requested from: NTE/The PRAXIS Series: ETS, P.O. Box 6051, Princeton, NJ 08541-6051.

**LICENSURE** North Carolina law requires that all teachers, principals, and other professional school personnel hold a valid North Carolina license. It is your responsibility to obtain and maintain your license in current status. Please note that individuals qualifying for a North Carolina license based on reciprocity with another state may be required to meet North Carolina's PRAXIS II requirements.

Do you hold a North Carolina license? Yes  No  If yes, please enclose a copy and complete the information below.

Issue Date \_\_\_\_\_ Effective Date \_\_\_\_\_ Expiration Date \_\_\_\_\_  
Month Day Year                      Month Day Year                      Month Day Year

Program	Licensure Area(s)	Class	Experience

Subject(s) in which you expect to receive a NC license (if you do not have one) \_\_\_\_\_

Other state(s) in which you hold a valid teaching license/certificate: \_\_\_\_\_ Please attach copy(s)

**EDUCATIONAL PREPARATION** (Enclose copy of all college and university transcripts. Must be degree dated. Photocopies are acceptable.)

College/University	City/State	Dates Attended		Field of Study	Type of Degree	GPA	Date Awarded
		(From)	(To)				

College Major \_\_\_\_\_ Minor \_\_\_\_\_

Was your college program in Teacher Preparation? Yes  No  If yes, give area(s) of Teacher Training: \_\_\_\_\_

**STUDENT TEACHING** If you completed student teaching within the last three years or are now student teaching, please complete the following:

School \_\_\_\_\_ Grade/Subject \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Mo. Yr. Mo. Yr.

Address \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Supervising Teacher \_\_\_\_\_

Home Address \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

College Supervisor \_\_\_\_\_

College/University Address \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

Home Address \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_

**TEACHING EXPERIENCE** (List in chronological order beginning with last employment)

Dates (Mo/Yr)	Name of School	Name of School System	City/State	Grade and Subject Taught	Total Years	Reason For Leaving
From / To /						
From / To /						
From / To /						
From / To /						
From / To /						
From / To /						

Have you ever attained tenure in a North Carolina School System? Yes  No

If yes, name of System(s) and date(s) attained \_\_\_\_\_

Have you ever participated in the Initially Licensed Teacher (ILT) Program in North Carolina? Yes  No

If yes, name of System \_\_\_\_\_ Number of years completed \_\_\_\_\_

**NON-TEACHING EXPERIENCE**

Dates (Mo/Yr)	Employer	Location (City/State)	Position Held	Dates of Employment	Supervisor's Name and Phone #
From /					
To /					
From /					
To /					
From /					
To /					
From /					
To /					

**EXTRACURRICULAR ACTIVITIES** Please indicate sports and/or other extracurricular activities which you would like to coach/sponsor:

Sport/Activity	Sport/Activity	Sport/Activity

**REFERENCES**

It is the applicant's responsibility to have the following information provided to Orange County Schools in order to be considered for employment:

- A. The names of at least three reference sources must be provided and must include current employer, if employed, or last employer if not currently employed. Names listed should be those of persons who will be providing written references.
- B. Applicants who are beginning teachers with a college placement file must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement office or by listing names below.

Name of Reference	Position/Relationship	Mailing Address	Phone (Work)	Phone (Home)

**GENERAL INFORMATION**

Are you legally eligible for employment in the U.S.? Yes  No  N.C. Driver's License Number \_\_\_\_\_

Are you under legal or moral obligation to continue or accept employment in any other school system? Yes  No

If yes, where? \_\_\_\_\_ Present Position \_\_\_\_\_

Have you ever been employed by the Orange County School System? Yes  No

If yes, when? \_\_\_\_\_ Position \_\_\_\_\_ Location \_\_\_\_\_

Do you have relatives currently working for Orange County Schools? Yes  No  If yes, please list name, relationship, and where they are employed: \_\_\_\_\_

**PLEASE CHECK THE APPROPRIATE BOX: If you answer “Yes” to any of the questions below, please provide a detailed explanation in the space provided below.**

Have you ever been asked to resign from a position of employment or resigned under investigation? Yes  No

Have you ever been put on an Action/Improvement Plan or been told that you would be required to complete an Action Plan? Yes  No

Have you ever received a below standard or unsatisfactory rating on a job performance evaluation? Yes  No

Have you ever been suspended, dismissed, nonrenewed, demoted, or subject to any other disciplinary action? Yes  No

Have you ever been convicted of a violation of law other than a minor traffic violation? *(If you have been convicted of driving while impaired, you must answer “yes” to this question)* Yes  No

Have you ever plead guilty, plead no contest, received a Dismissal with Leave, a Prayer for Judgment, a Prayer for Judgment (continued), or entered into a Deferred Prosecution agreement for any charged violation of the law other than a minor traffic ticket? Yes  No

Are any criminal charges or proceedings pending against you? Yes  No

Are you currently under obligation to perform or have you ever performed community service? Yes  No

Have you ever been denied a teaching license or had a teaching certificate or license revoked or suspended? Yes  No

**IF YOUR ANSWER TO ANY OF THE ABOVE QUESTIONS IS “YES”, PLEASE EXPLAIN BELOW IN DETAIL NOTING CIRCUMSTANCES, DATE(S) AND LOCATION(S):**

### **OTHER INFORMATION**

Please use this space to give any additional information regarding the position(s) you are applying for and additional information not covered by this application.

I, the undersigned applicant/employee, hereby expressly authorize the Orange County Board of Education, its agents and employees to make any investigation of my personal or employment history, expressly including, but not limited to, federal and/or state criminal, law enforcement or traffic records. I further authorize any former employer, person, firm, corporation, credit agency, administrative body or governmental agency to give to the Orange County Board of Education, its agents or employees, any information they may have regarding me. In consideration of the review of my employment application by the Orange County Board of Education, its agents or employees, I hereby release the Orange County Board of Education and any and all providers of information to whom this release is sent from any liability as a result of furnishing or receiving this information.

Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or falsely answered statements made by me on this application, or any supplement to it, will be sufficient grounds for failure to employ or for my discharge should I become employed with the system.

### **NON-DISCRIMINATION POLICY**

It is the policy of the Orange County Board of Education not to discriminate on the basis of gender, race, religion, color, creed, national origin, handicap, or age in its education program, activities, or employment practices.

**Employment with the Orange County School System is conditional pending approval by the Orange County Board of Education.**

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

TO THE APPLICANT: Please direct this form to one of the individuals you have selected as a reference.

## ORANGE COUNTY BOARD OF EDUCATION REFERENCE FOR CERTIFICATED EMPLOYEES

Applicant's Name \_\_\_\_\_ Position Applied For \_\_\_\_\_  
(Last) (First) (MI) (Ex. Elementary, Math, etc.)

**TO THE REFERENCING INDIVIDUAL:**

Please respond to each of the areas below giving your candid opinion of the applicant's qualifications for the position indicated above. Narrative comments can be made on the back of this form and are welcome if you desire to elaborate. This response is confidential and will be maintained in a separate pre-employment file and will not be made available to the employee except under subpoena or court order. Thank you for your assistance.

(Indicate level at which applicant consistently performs)		Superior	Well Above	Above	Standard	Below	Unsatisfactory
Complete for: All Applicants	1. Character (general conduct, ethics, morals)						
	2. Personal Appearance (dress, grooming)						
	3. Enthusiasm						
	4. Willingness to accept criticism						
	5. Ability to work without close supervision						
	6. Ability to work closely with others						
	7. Dependability						
	8. Promptness and thoroughness						
	9. Overall attitude						
	10. Loyalty and cooperation						
	11. Decision-making skills						
Complete for: Teacher Applicants	1. Management of Instructional Time						
	2. Management of Student Behavior						
	3. Presentation of Instruction						
	4. Monitoring of Student Performance						
	5. Provision of Feedback to Students						
	6. Evidence of Planning, Use of Resources						
	7. Interaction with Students and Co-workers						
	8. Assumption of Non-instructional Duties						
	9. Evidence of Professional Growth						
	10. Enthusiasm for Teaching						
	11. Communication Skills (written and oral)						
	12. Scholarship						
Complete for: Administrative Applicants	1. Skill in area applied for						
	2. Evaluates the school program						
	3. Involves staff in development and implementation of school plans						
	4. Monitors expenditure of funds and assumes accountability for all monies						
	5. Uses community resources that support the total school program; involves and cooperates with the community						
	6. Delegates responsibility						
	7. Evaluates professional and non-professional staff						
	8. Communicates clearly defined disciplinary procedures to parents, students, staff, community						
	9. Leadership skills						
	10. Is a team player						

Special Strength (s) \_\_\_\_\_

Weakness (es) \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_

If you were personally responsible, would you recommend the employment of this applicant? \_\_\_\_\_

Signature \_\_\_\_\_ Name (please print) \_\_\_\_\_

Date \_\_\_\_\_ Position \_\_\_\_\_  
 Company/School \_\_\_\_\_

Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

## ORANGE COUNTY SCHOOLS

### NOTIFICATION/RELEASE OF INFORMATION FORM

The Orange County Schools require all applicants to consent to a criminal record check in consideration for employment and/or in the course of your employment with the Orange County Schools. All applicants who have begun their employment will be temporary employees pending the review of the criminal records check.

In order to be considered a candidate for permanent employment in the Orange County Schools, you must authorize the school system to obtain a criminal history report on you.

#### Authorization

Please complete this form if you authorize the Orange County Schools to obtain a criminal history report from a credit-reporting agency, the North Carolina State Bureau of Investigation, or other agency or source of information.

\_\_\_\_\_  
Last Name                      First Name                      Middle                      Maiden

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
Social Security #                      Date of Birth                      Age                      Gender                      Race

\_\_\_\_\_  
Driver's License #                      State of Issue

\_\_\_\_\_  
Present Address    City    State

I hereby authorize the Orange County Schools to obtain a criminal history report from a credit reporting agency, the North Carolina State Bureau of Investigation, or other agencies or source of information. This releases the aforesaid parties from any liability and responsibility for collecting the above information.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

# Orange County Schools History of Residence(s)

**The requested information should include the last ten (10) years of residence(s).**

**CURRENT ADDRESS:**

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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Last Name	First Name	Middle Name	Maiden Name	Social Security #
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Street Address	City	State	County	Zip Code
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Any other names used while living at this address: \_\_\_\_\_

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Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
-----------	------------	-------------	-------------	-------------------

---

Street Address	City	State	County	Zip Code
----------------	------	-------	--------	----------

Any other names used while living at this address: \_\_\_\_\_

---

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
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---

Street Address	City	State	County	Zip Code
----------------	------	-------	--------	----------

Any other names used while living at this address: \_\_\_\_\_

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Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
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Street Address	City	State	County	Zip Code
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Any other names used while living at this address: \_\_\_\_\_

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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Last Name	First Name	Middle Name	Maiden Name	Social Security #
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Street Address	City	State	County	Zip Code
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Any other names used while living at this address: \_\_\_\_\_

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Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
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---

Street Address	City	State	County	Zip Code
----------------	------	-------	--------	----------

Any other names used while living at this address: \_\_\_\_\_

---

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
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---

Street Address	City	State	County	Zip Code
----------------	------	-------	--------	----------

Any other names used while living at this address: \_\_\_\_\_

---

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

---

Last Name	First Name	Middle Name	Maiden Name	Social Security #
-----------	------------	-------------	-------------	-------------------

---

Street Address	City	State	County	Zip Code
----------------	------	-------	--------	----------

Any other names used while living at this address: \_\_\_\_\_

---

Dates at this address: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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Last Name	First Name	Middle Name	Maiden Name	Social Security #
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Street Address	City	State	County	Zip Code
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Any other names used while living at this address: \_\_\_\_\_