

EDUCATOR APPLICATION

Return to:
GRAND COUNTY SCHOOL DISTRICT
264 South 400 East
Moab UT 84532

Date:	Social Security Number
Name (Last / First / Middle):	
Address (Street / City / State / Zip)	
Home Phone:	Phone number during the day
Date of Birth (Optional):	Place of Birth (Optional):
Position(s) for which are applying:	
Do you hold a current teaching certificate?	For which state?
In what subject area?	When does it expire?
Have you ever been convicted of a felony? YES NO If yes, please explain:	

EDUCATIONAL PREPARATION (List most current education first)

Inclusive Dates	Name & Address of School	Degree	Credits Earned	Major/Minor	Date of Graduation

EXPERIENCE (List student teaching and all paid educational experience)

Grade / Subject Taught	Name & Address of School	Dates	Principal / Director & Phone Number	Number of Qtrs. / Smstrs
Student Teaching				

OTHER WORK EXPERIENCE

Dates of Employment	Employers Name & Address	Type of Work & Position Held Full or Part-time	Telephone Number

REFERENCES (If available, a college placement bureau file is preferable over individual references)

Name	Address	Position / Business	Telephone Number

ADDITIONAL INFORMATION (List any other information which will assist us in reaching a true estimate of your qualifications)

PLEASE ANSWER THE FOLLOWING QUESTIONS

1. What are your three most important reasons for wanting to be a teacher?

2. In order to be most helpful to students, how much do you want to know about them?

3. What three things do you most want to know about your students?

4. What do you need to know in order to begin your lesson planning for a class?

5. What four key components do you believe you must include in your lesson plan?

6. When you think about your students, in what major ways do you most want to influence their lives?

7. Referring to #6, what two core teaching strategies do you use most to achieve the desired results?

8. What does it mean to integrate technology into the curriculum?

9. How would you use technology in this job?

AFFIRMATION:

I certify that all statements made in this application are true and correct, and that any misstatement of material facts may subject me to disqualification or dismissal. Also, I authorize investigation of all statements made in this application.

Signature: _____

Date: _____