

NKCES

Northern Kentucky Cooperative for Educational Services

5516 East Alexandria Pike

Cold Spring, KY 41076-3540

(859) 442-8600

Fax (859) 442-7015

APPLICATION FOR PROFESSIONAL EMPLOYMENT

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name _____

Present Address _____
LAST FIRST MIDDLE

STREET CITY STATE ZIP

Telephone Number (____) _____

Permanent Address _____

STREET CITY STATE ZIP

Telephone Number (____) _____

POSITION DESIRED

Position _____ Date Available for Position _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

PROFESSIONAL PREPARATION

College/University and Location	Dates of Attendance	Type of Degree	Year Earned	Major	Minor

Number of undergraduate credits _____ Number of credits beyond graduate degree _____

Subjects of special study or research work _____

Scholastic honors and/or positions of leadership _____

PROFESSIONAL EXPERIENCE (List most recent first)

Dates Employed	School/District and Address	Salary	Assignment	Supervisor and Phone Number

List other school assignments in which you have participated during your career, (e.g., organization sponsor, coach, district committees, etc.) _____

Attention: Certified Applicants If you have your **Kentucky Teaching Certificate** or **Statement of Eligibility**, it must be submitted, along with any other information you deem pertinent. If you **do not** have a Kentucky certification, you must include **original transcripts** from each college that you have attended. You must also apply to the Kentucky Department of Education on a Form TC-1. Once your certification has been received, a copy must be forwarded to be added to your file.

FORMER EMPLOYERS (NON-TEACHING EXPERIENCE)

(List below last four employers, most recent first)

Dates Employed	Name and Address of Employer	Salary	Position	Kind of Work Performed

Military Service: Branch _____
 Dates Served _____ Type of Discharge _____

REFERENCES (Give the names of three persons not related to you, whom you have known at least one year)

Name	Street	City	State	Zip	Phone #	Occupation
1. _____						
2. _____						
3. _____						

In case of emergency, notify _____
NAME RELATIONSHIP PHONE

ADDITIONAL INFORMATION

Do you have any hobbies or interests which have a direct bearing on the position you have applied for? _____
 If yes, please list: _____

Have you ever been convicted of a felony? _____
 If yes, please explain: _____

Please list any other information that in your opinion would be helpful to the Northern Kentucky Cooperative in considering you for employment. _____

Why do you want to be employed with the Cooperative? _____

I certify that the information and statements provided in this application are true to the best of my knowledge and belief.

 Signature of Applicant Date

In accordance with existing state and federal laws, the Northern Kentucky Cooperative will employ qualified personnel for all positions without regard to race, color, creed, sex, age, religion, or national origin. Selection of candidates for positions will be made upon the basis of demonstrated capability, competence, and appropriate experiences.

For this type of employment, state law requires a state criminal history background check as a condition of employment. Under certain circumstances, a national criminal history background check may be required as a condition of employment.

All Northern Kentucky Cooperative programs are operated in compliance with Title IX regulations regarding sex discrimination and Section 504 regarding disabled persons.

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Attn: Human Resources

PH: (859) 442-8600

FX: (859) 442-7015

AFFIRMATIVE ACTION INFORMATION FORM

We are an affirmative action government contractor. In compliance with government regulations we are required to record the number of applicants by race and sex.

We ask that you indicate your race or national origin and sex. DO NOT WRITE YOUR NAME. This information will not be kept with your application and will be used only in accordance with federal and state regulations.

YOU ARE NOT REQUIRED TO PROVIDE THIS INFORMATION. Your application for employment will be considered in the same manner whether or not you fill out this form.

Male

Female

American Indian

Asian

Black

Hispanic

Other _____
(please specify)

Non-minority

CHARACTER AND FITNESS

Answer each question by circling "yes" or "no." If you answer yes to any question, you must submit a full explanation using a separate sheet of paper.

1. Have you ever held, or currently hold a professional certificate, license, credential, or other document issued to you by any jurisdiction (other than Kentucky) within the United States or abroad? If so, fill in the information below.

State or Jurisdiction _____ Certificate number _____

Type _____ Issue Date _____ Expiration date _____

2. Have you ever had a professional certificate, license, credential, or any document issued to you for practice denied, suspended, revoked, or voluntarily surrendered?

Yes _____ No _____

3. Are you currently being reviewed or investigated for purposes of such action as stated in #2 or is such action pending?

Yes _____ No _____

4. Have you ever been dismissed, resigned, or asked to resign/retire or discharged from a professional position or military service for immorality, incompetence, willful neglect of duty, misconduct, or presenting false information toward obtaining the position?

Yes _____ No _____

5. Is any such action as stated in #4 pending?

Yes _____ No _____

6. Have you ever been convicted of a felony or misdemeanor (other than a moving traffic violation), been found guilty or entered a plea or nolo contendere (no contest), even if adjudication was withheld, in Kentucky or any other state?

Yes _____ No _____

7. If you indicated "yes" to any items, #2 through #6, has that conviction been reviewed by the Educational Professional Standards Board?

Yes _____ No _____ Date of Review _____

I affirm and declare that all information given by me in this application is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial of position applied for.

Signature _____ Date _____