

# SUPPORT STAFF APPLICATION FOR EMPLOYMENT BENTON COUNTY SCHOOLS

197 Briarwood Avenue  
Camden, TN 38320



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position you are seeking: \_\_\_\_\_

Date of available employment: \_\_\_\_\_

Clerical and Teacher Assistant Positions must be or become Highly Qualified as defined by Federal requirements prior to official employment status.

The Benton County School System is an Equal Opportunity Employer. The school system does not discriminate on the basis of age, sex, race, color, creed, religion, national origin or handicapping condition in the operation of its educational programs and activities including employment practices.

**PERSONAL INFORMATION:**

Name: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Telephone: (    ) \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

**EDUCATIONAL PREPARATION (Include High School and Colleges)**

<b>Institution Attended</b>	<b>Location</b>	<b>Dates Attended</b>	<b>Did you Graduate? Yes/No</b>

**COLLEGE:**

<b>Institution Attended</b>	<b>Location</b>	<b>Dates Attended</b>	<b>Degree Earned</b>	<b>Major</b>	<b>Minor</b>

**WORK EXPERIENCE:** (List in order beginning with most recent)

Position	Name, Address and Phone of Employer	Immediate Supervisor	Date(s) Worked

**REFERENCES:**

Name	Address / Phone	Position

Date of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ (Check one)

Special Interests or hobbies: \_\_\_\_\_

\_\_\_\_\_

**READ THE FOLLOWING BEFORE SIGNING THIS APPLICATION.**

1. I recognize that if I am employed, I may be assigned or reassigned to a specific position as the need requires.
2. I have not been convicted of a misdemeanor or a felony in any state of the United States.
3. I understand that the Benton County Board of Education will conduct federal, state and/or local background investigations on all job applicants that are employed (Board Policy 5.106).
4. I have not been dismissed from any previous employment for improper or unprofessional conduct, inefficient service, neglect of duty, incompetence or insubordination. I have not voluntarily resigned to avoid an investigation or dismissal proceedings.
5. If my most recent employer was another Tennessee public school system and if my termination was voluntary, I certify that my resignation was, or will be submitted in writing at least fourteen (14) days prior to the beginning date stated; or, if within fourteen (14) days, that the previous Director of Schools has waived that Board's right to such notice. A copy of my letter of resignation or release from contract is attached or will be provided.
6. I do not have any contagious or communicable disease which may endanger the health of school children.
7. A negative, pre-employment drug screen and report of physical exam must be provided at the expense of the employee after official notice of hiring and acceptance of the position.
8. I shall support the constitutions of Tennessee and the United States.
9. I have read the above statements and understand that knowingly falsifying information required by TCA 49-5-406a)(1) shall be sufficient grounds for termination of employment and shall also constitute a Class A misdemeanor which must be reported to the District Attorney General for prosecution.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Typed or Printed Name of Applicant

\_\_\_\_\_  
Date



(Optional)  
Attach Picture