

**CERTIFIED**

*Picture of  
Applicant*

**LAFOURCHE PARISH SCHOOL BOARD  
Post Office Box 879  
Thibodaux, LA 70302**

**CERTIFIED TEACHER APPLICATION FORM**

**PLEASE CHECK ITEMS ATTACHED TO THIS FORM:**

- \_\_\_\_\_ Official transcript of credits reflecting degree
- \_\_\_\_\_ Copy of my PRAXIS and/or NTE scores
- \_\_\_\_\_ Teaching certificate
- \_\_\_\_\_ Copy of last two years observations/evaluations
- \_\_\_\_\_ Request for Information form (If you are presently teaching outside of the Lafourche Parish school system, board policy requires a Request for Information form completed by the Supervisor of Personnel of that school system.)

**YOUR APPLICATION IS CONSIDERED INCOMPLETE UNTIL ALL ITEMS ARE RECEIVED IN THIS OFFICE.**

(Please print or type)

Date \_\_\_\_\_

**PERSONAL**

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

Race \_\_\_\_\_ (For Statistical Purposes Only)

Present Address \_\_\_\_\_  
Street & No. City State Zip Code

Phone Number: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Permanent Address \_\_\_\_\_  
Street & No. City State Zip Code

Phone Number: \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
City State

**PREPARATION**

High School Education

Graduate of \_\_\_\_\_ High School Date \_\_\_\_\_

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

**PROFESSIONAL EDUCATION**

| <u>Name of Institution</u> | <u>Address</u> | <u>Dates From / To</u> | <u>Sem. Hrs. or Degree Earned</u> |
|----------------------------|----------------|------------------------|-----------------------------------|
| _____                      | _____          | _____                  | _____                             |
| _____                      | _____          | _____                  | _____                             |

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

**QUALIFICATIONS**

Louisiana teaching certificate YES  NO

Type \_\_\_\_\_ Number \_\_\_\_\_ Date Issued \_\_\_\_\_

List subjects shown on certificate \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Grade or subject matter area in which student teaching was done  
\_\_\_\_\_

School in which student teaching was done  
\_\_\_\_\_

Out-of-state certificate YES  NO

Type \_\_\_\_\_ Number \_\_\_\_\_ Date Issued \_\_\_\_\_

List subjects shown on certificate \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Write a brief statement of your reasons for a choice of teaching as a profession:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TEACHING PREFERENCE**

Elementary School -- Grades: \_\_\_\_\_

Junior High and/or Middle School -- Subject Area(s):  
\_\_\_\_\_

Senior High School -- Subject Area(s):  
\_\_\_\_\_

Special Education -- Subject Area(s):  
\_\_\_\_\_

**TEACHING EXPERIENCE**

| No. of Years | Inclusive Dates |            | Name & Address of School System (Public or Private) | Grades or Subjects Taught |
|--------------|-----------------|------------|---|---------------------------|
|              | From Mo. Yr.    | To Mo. Yr. |   |                           |
| _____        | _____           | _____      | _____<br>_____<br>_____                             | _____                     |
|              |                 |            | Reason for leaving _____                            |                           |
| _____        | _____           | _____      | _____<br>_____<br>_____                             | _____                     |
|              |                 |            | Reason for leaving _____                            |                           |
| _____        | _____           | _____      | _____<br>_____<br>_____                             | _____                     |
|              |                 |            | Reason for leaving _____                            |                           |
| _____        | _____           | _____      | _____<br>_____<br>_____                             | _____                     |
|              |                 |            | Reason for leaving _____                            |                           |

(If additional space is needed, please continue on a separate page.)

Total years of full-time teaching experience: \_\_\_\_\_

**MILITARY SERVICE RECORD**

Branch of Service \_\_\_\_\_

Total Years of Service \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

**REFERENCES**

(List at least three references--former employers, professors, supervising teacher, etc.)

| Name                  | Official Position | Address                 |
|-----------------------|-------------------|-------------------------|
| _____                 | _____             | _____<br>_____<br>_____ |
| E-Mail Address: _____ |                   | Phone: _____            |
| _____                 | _____             | _____<br>_____<br>_____ |
| E-Mail Address: _____ |                   | Phone: _____            |
| _____                 | _____             | _____<br>_____<br>_____ |
| E-Mail Address: _____ |                   | Phone: _____            |



**OTHER**

College Honors:

Professional Honors:

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Have you ever been convicted of a crime of moral turpitude?

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Are you presently under contract with another school system?

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If so,

1. Does your employer know that you are seeking other employment?
2. Can you obtain release from your present contract?

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I hereby grant permission to the Lafourche Parish School Board to contact those persons necessary to confirm any of the information hereinabove contained and to authorize verification of information to be released to the Lafourche Parish School Board.

I certify that all information is true and accurate to the best of my knowledge. I understand that any falsification or misrepresentation will be sufficient grounds for my release from employment.

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Signature of Applicant

**LAFOURCHE PARISH SCHOOL BOARD  
IS AN EQUAL OPPORTUNITY EMPLOYER**