



APPLICATION for PROFESSIONAL SERVICES

Lateral Entry ___ **Graduate Student** ___

This application should be submitted to:

Adult & Children Enterprises, Inc.

P.O. Box 27025

Raleigh, NC 27611

Each application **must** bear an **original signature on page 4.**

Application to ACE 21st Century Community Learning Program

Please complete this application in your own handwriting.

PERSONAL INFORMATION				
Name _____				
<i>Preferred Title</i>	<i>First</i>	<i>Middle/Maiden</i>	<i>Last Nickname</i>	
Permanent Address _____				
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
Home Phone (____) _____ Office (____) _____				
Other Contact (____) _____				
Temporary Address _____				
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	
Home Phone (____) _____ Office (____) _____				
Other Contact (____) _____				
From Date _____ Until Date _____				
Social Security Number _____ - _____ - _____				
Circle One: <i>New Applicant/Former Applicant/ Former Employee</i>				
Positions for which application is being made (be specific). Applicant must be licensed or in an approved licensure program or eligible for license in each area of choice. Examples: <i>K-6, Art, 9-12 English, Exceptional Children—Mentally Handicapped, Social Worker, Principal, etc.</i>				
First Choice _____				
Second Choice _____				
Third Choice _____				
Date Available for Employment _____				
Please state briefly your reason for wanting to teach in North Carolina.				

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 a current status. Please note that individuals qualifying for a North Carolina license based on reciprocity with another state are required to meet North Carolina's NTE/Praxis II requirements.

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

Date License Issued _____ Date Effective _____ Date Expires _____

PROGRAM	LICENSURE AREA(S)	CLASS	EXPERIENCE
Example: 01 (initial	78400 (6-9 Social Studies)	A	1 Year

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

Other states in which you hold a valid teaching license/certificate. [Please send copy(s).]:

Educational Preparation

Level of Education	Name of School or University	State	Field of Study	Type of Degree	GPA	Dates of Attendance
High School						
College						

Teaching Experience (List chronologically all teaching experience. Do not include substitute teaching.)

Name of School	Name of School System or Unit	State	Position Held Grades and/or Subjects Taught (Specify)	Dates Mo/Day/Yr (From...To)	Total Years	Supervisor's Name & Phone No.

Have you ever achieved tenure in a North Carolina School system? If yes, when and where?

Work Experience Other Than Teaching (List Chronologically)				
<i>Employer</i>	<i>Complete Mailing Address</i>	<i>Kind of Work</i>	<i>Dates of Employment</i>	<i>Supervisor's Name and Phone No.</i>

References				
<p><i>Each applicant must provide the following information to be considered for tutoring position in the after-school program:</i></p> <p><i>A. The names of at least four references sources. Include current employer if employed, or last employer if not currently employed. References from relatives or persons who can evaluate only your personality and character are not acceptable. References who have known you for at least four years and/or are substantially familiar with your education achievements and work history are preferred.</i></p> <p><i>B. Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s) in the placement file and list names below.</i></p>				
<i>Name of Reference</i>	<i>Position</i>	<i>Complete Mailing Address</i>	<i>Phone Number</i>	
			<i>Home</i>	<i>Work</i>
1.				
2.				
3.				
4.				
<p><i>May we contact your present employer? Yes No Not Applicable</i></p> <p><i>May we share your name/application with other school employers as they request referrals Yes No</i></p>				

Additional Information		
<p><i>Please check appropriate answers:</i></p> <p><i>Yes No</i></p> <p><i>___ ___ Have you ever been asked to resign from a position of employment or been dismissed, fired, discharged, suspended, or otherwise subject to disciplinary action?</i></p> <p><i>___ ___ Have you ever had a teaching license or certificate suspended or revoked?</i></p> <p><i>___ ___ Have you ever been convicted of any violation of the law other than a minor traffic ticket?</i></p> <p><i>___ ___ Have you ever entered a plea of nolo contendere (no contest) to any charge against you?</i></p> <p><i>___ ___ Do you have any criminal charges pending against you or are you currently involved in any criminal proceeding, including supervised or unsupervised probation?</i></p>		
<p><i>If your answer to any of the above questions is yes, please explain on a separate page and include with this application.</i></p>		
<i>Driver's License Number</i>	<i>State</i>	<i>Class</i>

Related Activities

Please list below those school activities in which you are interested and which you are qualified to supervise, coach, or direct. Please be specific about coaching experience. Use another page if needed.

Other Interests/Hobbies

Please list any subject which you may be qualified but not licensed or certified to teach.

Additional Information

Please use the space below to provide whatever additional information you would like to share about yourself. This information could be a short autobiography, additional information regarding your cultural and educational background, your preparation, experience, interests and hobbies, plans ,recreational activities, travel, or community experiences with children. Please feel free to elaborate on information already given elsewhere in this application.

CONFIDENTIAL

Sign: _____ *Date:* _____