



NORWALK PUBLIC SCHOOLS  
125 EAST AVENUE, P. O. BOX 6001  
NORWALK, CONNECTICUT 06852-6001

## APPLICATION FOR EMPLOYMENT TEACHER

PLEASE TYPE OR PRINT LEGIBLY

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

Name: \_\_\_\_\_ SS#: \_\_\_\_\_  
Last First Middle Initial

Present Address: \_\_\_\_\_  
Street City State Zip Code

Phone: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_  
Area Code Area Code

Permanent Address: \_\_\_\_\_  
Street City State Zip Code

Phone: (Home) \_\_\_\_\_ (Work): \_\_\_\_\_  
Area Code Area Code

**APPLYING FOR:**

List grades/subjects you are certified to teach in order of preference.

- ELEMENTARY GRADE(S) \_\_\_\_\_
- MIDDLE SCHOOL SUBJECT(S) \_\_\_\_\_
- HIGH SCHOOL SUBJECT(S) \_\_\_\_\_
- AREA OF SPECIALIZATION \_\_\_\_\_

HOW DID YOU HEAR ABOUT JOB OPPORTUNITIES WITH THE NORWALK PUBLIC SCHOOLS?

\_\_\_\_\_

**FOR OFFICE USE ONLY**

- |   |  |                                     |
|---|--|-------------------------------------|
| <input type="checkbox"/> Copy of CT Certification   | <input type="checkbox"/> W4 (Federal)                            | <input type="checkbox"/> W4 (State) |
| <input type="checkbox"/> Official Transcripts   | <input type="checkbox"/> CT Teacher's Retirement Form            |                                     |
| <input type="checkbox"/> Form 1-9 & Verification  | <input type="checkbox"/> Physical Form                           |                                     |
| <input type="checkbox"/> Salary Plan: 22 <input type="checkbox"/> 26 <input type="checkbox"/> | <input type="checkbox"/> Verification of Professional Employment |                                     |
| <input type="checkbox"/> Evidence of Military Service   | <input type="checkbox"/> Insurance                               |                                     |
| <input type="checkbox"/> Criminal Record Check  | <input type="checkbox"/> 3 Letters of Reference                  |                                     |

AN EQUAL OPPORTUNITY EMPLOYER

The Norwalk Board of Education is an equal opportunity employer. It hires qualified personnel based upon the individual merits and achievements of applicants and employees. All hiring decisions are made without regard to race, religion, color, national origin, gender, age, marital status, sexual preference, or physical or mental disability of any applicant.

## APPLICATION FOR EMPLOYMENT \* PAGE 2

Type of Connecticut Certificate you hold: (Please enclose a copy) _____
Endorsements (Include Grade and/or Subjects) _____
Applicants must assume full responsibility for proper certification by the Connecticut State Department of Education.

List all graduate credits taken since your degree. Credits not listed below will not be considered at a later date toward salary schedule advancement. (Official transcripts will required at a later date).

**EDUCATIONAL PREPARATION:**

Name of School:	Dates:		Specialization:				Degree or Diploma:
	From	To	Major	Semester Hours	Minor	Semester Hours	
University - Undergraduate							
University - Graduate							

**STUDENT FIELD EXPERIENCE: (PRACTICE TEACHING, INTERNSHIP, ETC.)**

Name of School or Agency:	Dates:	Assignment:	Supervisor In Training:

**SCHOLASTIC HONORS AND EXTRA-CURRICULAR ACTIVITIES:**

**RELATED PROFESSIONAL EXPERIENCE: (TUTORING, VOLUNTEER WORK, TRAVEL, PRIVATE STUDY, LECTURING, PUBLICATIONS, MEMBERSHIPS IN PROFESSIONAL ORGANIZATIONS, ETC.)**

Nature of Experience:	Dates:	
	From	To

**MILITARY SERVICE: ORIGINAL DISCHARGE PAPERS REQUIRED FOR SALARY PLACEMENT.**

Dates:		Total Months:
From	To	

# APPLICATION FOR EMPLOYMENT \* PAGE 3

**PROFESSIONAL EMPLOYMENT:**

**Experience not listed below will not be considered at a later date toward salary schedule advancement. Attach additional sheet if necessary.**

Name of School/District: _____	Telephone # _____
Address: _____	Employed From: _____ To: _____
Position: _____	Grade Level: _____ District Size: _____
Name of Supervisor: _____	

Name of School/District: _____	Telephone # _____
Address: _____	Employed From: _____ To: _____
Position: _____	Grade Level: _____ District Size: _____
Name of Supervisor: _____	

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Address: _____	Employed From: _____ To: _____
Position: _____	Grade Level: _____ District Size: _____
Name of Supervisor: _____	

Name of School/District: _____	Telephone # _____
Address: _____	Employed From: _____ To: _____
Position: _____	Grade Level: _____ District Size: _____
Name of Supervisor: _____	

**We may contact the employers listed above for references and verification of employment.**

## APPLICATION FOR EMPLOYMENT \* PAGE 4

In your own words:

What would you do to create a learning environment in your classroom so that every student learns and grows and feels valued?

Disclosure of criminal convictions on the separate form constitute part of this application. False statements on that form shall be considered sufficient cause to begin dismissal proceedings.

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

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Date

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Signature of Applicant

Send **completed** application to:

HUMAN RESOURCES OFFICE  
NORWALK PUBLIC SCHOOLS  
125 EAST AVENUE, BOX 6001  
NORWALK, CT 06852-6001

To give proper consideration to your application, please send the following documents:

- \* Completed Application
- \* Resumé
- \* Three Letters of Reference
- \* Copy of Connecticut Certification(s)
- \* Copies of all Transcripts: Undergraduate, Graduate, Post-Graduate

**NORWALK PUBLIC SCHOOLS**  
**Norwalk, Connecticut 06852**

**CRIMINAL RECORDS**  
ADDENDUM TO EMPLOYMENT APPLICATION

**NOTICE CONCERNING ERASED CRIMINAL RECORDS:** In answering the following questions concerning criminal history, YOU ARE NOT REQUIRED TO DISCLOSE THE EXISTENCE OF ANY ARREST, CRIMINAL CHARGE OR CONVICTION THE RECORDS OF WHICH HAVE BEEN ERASED PURSUANT TO C.G.S. §§46b-146,54-76o, or 54-142a. Under these statutory provisions, records pertaining to the following are subject to erasure: (a) a finding of delinquency or that a child was a member of a family with service needs, (b) an adjudication as a youthful defender, (c) a criminal charge that has been dismissed or nolle, (d) a criminal charge for which you have been found not guilty and (e) a conviction for which you received an absolute pardon. Any person whose criminal records have been erased shall be considered to have never been arrested with respect to the proceedings so erased and may so swear under oath.

1. Have you ever been convicted of a felony or any other criminal offense, either within or outside the State of Connecticut, other than a conviction of which the records have been erased?     Y     N

If so, identify the approximate date, location and nature of each such conviction on a separate sheet of paper and attach to this addendum. For purposes of this application, a plea of "no contest or "nolo contendere" is a conviction.

2. Has there ever been a disposition of criminal charges against you for which the records have not been erased?     Y     N

If so, identify the approximate date, location and nature of each such disposition and the nature of the charges against you. (If additional space is needed, please attach a separate sheet to this form.)

3. Are any criminal charges pending against you either within or outside the State of Connecticut?     Y     N

If so, identify the jurisdiction in which such charges are pending and the nature of the charges filed against you. (If additional space is needed, please attach a separate sheet to this form.)

4. Are you currently participating in a program of deferred adjudication (e.g., accelerated rehabilitation, pre-trial drug or alcohol education, pursuant to Connecticut General Statutes section 54-56g)?     Y     N

If so, identify the jurisdiction in which such program is pending and the nature of the charges filed against you. (If additional space is needed, please attach a separate sheet to this form.)

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

NORWALK PUBLIC SCHOOLS  
Norwalk, CT

OPTIONAL

Submission of this information is voluntary, and refusal to provide it will not subject you to discharge, disciplinary treatment or any other adverse consequences. Information obtained concerning individuals will be kept confidential and will be used only in accordance with federal regulations.

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INVITATION TO SELF-IDENTIFY

\_\_\_\_\_  
Last                      First                      Middle                      Social Security No.

\_\_\_\_\_  
City                      State                      Zip

The Civil Rights Act of 1964 (title 42, United States Code, Section 20000e et seq.) and related laws and regulations require employers to monitor their equal employment opportunity compliance on a continuing basis. To aid in this review process, you are requested to identify your gender and group on this form. The information you furnish will be maintained only for the purpose of monitoring compliance with applicable laws and regulations concerning equal employment and will not be used for any other purpose.

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GROUP STATUS (Check One)

- American Indian or Alaskan Native
- Asian or Pacific Islander
- Black (not Hispanic)
- Hispanic
- White (not Hispanic)

GENDER

- Female
- Male

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Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_