

NTE/Praxis Examination Scores

NTE Specialty Area(s) or Praxis II Examination				___ Yes	___ No
_____	_____	_____	Copy Enclosed?	___ Yes	___ No
Month/Year	Test code#/Test Name	Score			
_____	_____	_____	Copy Enclosed?	___ Yes	___ No
Month/Year	Test code#/Test Name	Score			

Work Experience

List work experience chronologically beginning with your current employer. Use an additional sheet if needed.

Name of School or Company: _____				From: _____	To: _____
Address: _____					
	(Street)	(City)	(State)	(Zip)	
Phone Number _____		<input type="checkbox"/> Full Time		<input type="checkbox"/> Part Time	
Job Title _____ Grade(s) and/or Subject(s) Taught: _____					
Reason for Leaving _____					
Name and Title of Supervisor: _____					
Supervisor Phone Number _____		May We Contact?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of School or Company: _____				From: _____	To: _____
Address: _____					
	(Street)	(City)	(State)	(Zip)	
Phone Number _____		<input type="checkbox"/> Full Time		<input type="checkbox"/> Part Time	
Job Title _____ Grade(s) and/or Subject(s) Taught: _____					
Reason for Leaving _____					
Name and Title of Supervisor: _____					
Supervisor Phone Number _____		May We Contact?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Name of School or Company: _____				From: _____	To: _____
Address: _____					
	(Street)	(City)	(State)	(Zip)	
Phone Number _____		<input type="checkbox"/> Full Time		<input type="checkbox"/> Part Time	
Job Title _____ Grade(s) and/or Subject(s) Taught: _____					
Reason for Leaving _____					
Name and Title of Supervisor: _____					
Supervisor Phone Number _____		May We Contact?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Student Teaching

Complete this section only if your student teaching was completed within the last three years or is in progress.

School _____ Grade/Subject _____ Dates: From _____ To _____

Address: _____ Phone No. _____

Supervising Teacher _____

Address: _____ Phone No. _____

Email: _____

College Supervisor: _____

Address: _____ Phone No: _____

Email: _____

Related Activities

What school activities you are interested in and qualified to supervise, coach, or direct?

Please describe any relevant coaching experience. Use another page if needed.

What subjects are you qualified, but not licensed or certified to teach?

Additional References

Each applicant must provide at least **three professional** references.

- Include your employer if they are not already listed in your work history.
- References should have known you for at least four years and/or are substantially familiar with your work performance. Personal references only are not acceptable.
- Applicants who are beginning teachers registered with a college placement office must include references from their student teaching supervisor(s) and cooperating teacher(s).

Name of Reference

Position

Mailing Address

Phone Number

Name of Reference	Position	Mailing Address	Phone Number

Additional Information

Driver's License Number _____ State _____ Class _____

Please list any family members who are currently employed at Mountain Island Charter School.

Name	Relationship

Please answer the following questions:

Yes No

- ___ ___ Have you ever been asked to resign from a position of employment or been dismissed, fired, discharged, suspended, or otherwise subject to disciplinary action?
- ___ ___ Have you ever had a teaching license or certificate suspended or revoked?
- ___ ___ Have you ever been convicted of any violation of the law other than a minor traffic ticket?
- ___ ___ Have you ever entered a plea of nolo contendere (no contest) to any charge against you?
- ___ ___ Do you have any criminal charges pending against you or are you currently involved in any criminal proceeding, including supervised or unsupervised probation?

If you answered yes to any of the questions above, please provide details in an attachment to this application.

Signature

I have read the information contained in the application carefully and certify that the information I have given is correct and complete. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature: _____ Date _____

Mountain Island Charter School, Inc. provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity, national origin, age, disability, genetic information, marital status, amnesty or status as a covered veteran in accordance with the applicable federal, state and local laws.

Submission

Include the following with your application:

- Copy of Teaching License
- Resume
- Additional pages for your response to application questions (if needed)

Please submit your completed application to MICS at 13440 Lucia Riverbend Highway Mount Holly, NC 28120 or email to resumes@micharter.org.