



SAIPAN COMMUNITY SCHOOL

P.O. BOX 500069 SAIPAN, MP 96950-0069

TELEPHONE: (670) 234-6687

FAX: (670) 235-7007

E-MAIL: principal@saipancommunityschool.com

PLEASE FILL OUT ALL BLANKS WITH COMPLETE DETAILED INFORMATION.
YOU ARE ENCOURAGED TO INCLUDE A RESUME OF QUALIFICATIONS.

Name in full (print) _____ Date of application _____

Present Address _____ Present Telephone No. _____

Permanent Address _____ Permanent Telephone No. _____

E-Mail Address _____

PLEASE ATTACH A RECENT PHOTO TO THE APPLICATION WHEN MAILED

POSITION BEING SOUGHT

For Elementary Position Only: (Number in order of preference)

Kindergarten Grade 1 Grade 2 Grade 3 Grade 4 Grade 5

ESL Music/Band Junior High Subject(s) desired: _____

Activities which you can sponsor/coach: _____

EDUCATIONAL AND PROFESSIONAL TRAINING

	School Name	Location	Years Attended	Major(s) or Minor(s)
High School				
College				
College				
Graduate School				

Extracurricular activities in high school or college _____

TEACHING AND/OR ADMINISTRATIVE EXPERIENCE

NAME AND LOCATION OF SCHOOL	GRADES OR SUBJECTS	FROM MO/YR	TO MO/YR	REASON FOR LEAVING

STUDENT TEACHING EXPERIENCE

NAME AND LOCATION OF SCHOOL	GRADES OR SUBJECTS	FROM MO/YR	TO MO/YR	SUPERVISING TEACHER

MILITARY EXPERIENCE

Branch of service _____ Rank: _____

Date of beginning of active service _____ Date of separation _____

Number of months of active duty: _____ Type of Discharge: _____
(HONORABLE, MEDICAL, ETC.)

WORK EXPERIENCE OTHER THAN TEACHING

NAME AND LOCATION OF SCHOOL	GRADES OR SUBJECTS	FROM MO/YR	TO MO/YR	REASON FOR LEAVING

NAME AND LOCATION OF SCHOOL	GRADES OR SUBJECTS	FROM MO/YR	TO MO/YR	REASON FOR LEAVING

LICENSURE INFORMATION				
TYPE OF LICENSE (ELEM., SEC., ETC.)	DATE ISSUED	DATE EXPIRES	ISSUING STATE	SUBJECT ENDORSEMENT/S GRADE LEVEL

Have you ever been terminated from a teaching position or asked to resign by a school employer? NO YES

Where: _____ Reason: _____

Within the past three (3) years, have you received an unsatisfactory performance evaluation from school employer?

If yes, explain _____

Do you have any impairments, physical or mental, which would interfere with your ability to perform the job for which you have applied? NO YES

How many days were you absent from the classroom last year? _____ (Illness) _____ (Other Reasons)

Do you chew, smoke, or drink alcohol? NO YES

Have you ever been arrested or convicted? NO YES

If yes to any of the above, explain _____

State your philosophy of education.

Why do you want to teach at Saipan Community School?

Tell something about your Christian belief and your personal relationship with Jesus Christ:

Summarize special job-related skills and qualifications acquired from employment or other experiences and/or state any additional information you may feel helpful in considering your application.

Do you know anyone who has visited or lived in Saipan? Explain.

I hereby certify that to the best of my knowledge and belief the foregoing statements are true, correct and complete. I further understand that this application will become a part of my permanent personnel file should I be employed by SCS.

Signed: _____ Date: _____

REFERENCES

Please list at least 3 references, which should include present and former department chairpersons, principals, and superintendents for whom you have worked as well as one pastoral reference. If you have recently completed student teaching, please include your cooperating teacher. These individuals may be contacted relative to your application.

NAME	OFFICIAL POSITION	REFERENCE ADDRESS	PHONE NUMBER
E-MAIL			

NAME	OFFICIAL POSITION	REFERENCE ADDRESS	PHONE NUMBER
E-MAIL			

NAME	OFFICIAL POSITION	REFERENCE ADDRESS	PHONE NUMBER
E-MAIL			

In addition to supplying the information above, please choose one of the options below:

- 1) if you have a credential file with confidential letters of reference, you may have it sent directly to the school.