



**THE CITY OF BAKER SCHOOL SYSTEM (CoBSS)**

**PHYSICAL ADDRESS: 14750 PLANK ROAD, BAKER, LOUISIANA 70714**

**MAILING ADDRESS: POST OFFICE BOX 680, BAKER, LOUISIANA 70704-0680**

**HUMAN RESOURCES PHONE NUMBER: (225) 778-2379 FACSIMILE NUMBER: (225) 774-5797**

All applicants being considered for a position will be required to submit to a background check and to a drug and alcohol screening. (Adopted 5/21/2002)

**EMPLOYMENT APPLICATION** (Handwritten or Typed in preferably blue ink; however, black ink acceptable)

Date Application Completed (mm/dd/yyyy) \_\_\_\_\_ SSN: \_\_\_\_\_

**GENERAL INFORMATION**

Name:

LAST NAME	FIRST NAME	MIDDLE NAME	(MAIDEN, if applicable)
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Cellular Phone #: (        ) -	Home Phone #: (        ) -
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Email Address: \_\_\_\_\_

Current Mailing Address:

Number and Street/Apartment Number	City	State	Zip Code
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Home Address:

Number and Street/Apartment Number	City	State	Zip Code
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(If different from mailing address OR write "SAME")

- Have you ever worked for the City of Baker School System?  YES or  NO  
 If so, when (m/y to m/y): \_\_\_\_\_ to \_\_\_\_\_  
 If so, what was/were the position(s): \_\_\_\_\_
- Have you ever applied to teach/work for the CoBSS?  YES or  NO
- Are you related to any of the current City of Baker School Board Members?  YES or  NO  
 If yes, list who (whom) and explain the relationship: \_\_\_\_\_

**OPTIONAL DEMOGRAPHIC INFORMATION**

The following information is collected to complete Equal Opportunity Reports required by law. You are not legally obligated to provide this information for the application process; however, it may be required for the employment process.

- Title:**  Mr.  Mrs.  Ms.  Dr.
- Gender:**  Male or  Female
- Date of Birth (M/D/Y)** \_\_\_\_\_
- Race/Ethnicity:**

<input type="checkbox"/> Black	<input type="checkbox"/> American Indian/Alaskan Native
<input type="checkbox"/> White	<input type="checkbox"/> Asian/Pacific Islander
<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Other: (Please List) _____

**RETIREMENT INFORMATION \*If you can, attach a copy of your retirement member summary page; if you don't have access, please alert HR and we can print one for you to attach**

1) Are you currently enrolled in a Louisiana retirement system?  Yes or  No If so, which of the following three choices:  
 Teachers Retirement System of Louisiana (TRSL)  
 Louisiana School Employees Retirement System (LSERS)  
 Louisiana State Employees Retirement System (LASERS)

2) Have you ever retired from a Louisiana retirement system?  Yes or  No If so, which one:  
 TRSL  LSERS  LASERS  
 If so, when is the date (mm/dd/yyyy) of your retirement? \_\_\_\_\_

3) Have you ever retired from another retirement system?  Yes or  No  
 If so, which one: \_\_\_\_\_

4) Are you are Retiree Who Returned To Work (RTW)?  Yes or  No  
 If so, what is the date (mm/dd/yyyy) of your original Return To Work? \_\_\_\_\_

5) Are you eligible for an increment for completion of PIP in the 1980s?  Yes or  No  
 If so, what is the Frozen Yearly PIP amount? \$ \_\_\_\_\_

**CLASSROOM TEACHING POSITIONS**

*(Please check one or more as desired, and indicate grade level(s) and/or subject area(s). Also, if appropriate, please indicate Special Education)*

<input type="checkbox"/> Baker Heights Elementary (PK-5 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Park Ridge Magnet School (K-8 <sup>th</sup> ) <input type="checkbox"/> Elementary (K-5 <sup>th</sup> ) <input type="checkbox"/> Middle (6 <sup>th</sup> -8 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____ Grade Level(s): _____ Subject Areas: _____
<input type="checkbox"/> Baker Middle School (6 <sup>th</sup> -8 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Baker High School (9 <sup>th</sup> -12 <sup>th</sup> )	Grade Level(s): _____ Subject Area(s): _____
<input type="checkbox"/> Baker Alternative Learning Center	Grade Level(s): _____ Subject Area(s): _____

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## OTHER JOB CATEGORIES

(Please check one or more job category(ies) and then **list OR circle** the position title(s) that you are applying for)

**NOTE:** As job descriptions are created and approved, all available positions may not be listed below. If the position(s) you are applying for is(are) not listed, simply list the position(s) under the most appropriate category.

**Central Office Administrators:** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Superintendent, Assistant Superintendent of Innovation & Student Achievement (Curriculum & Instruction), Supervisor of Instruction (K-12), Supervisor of Student Support Services (Child Welfare and Attendance & Transportation), Supervisor of Exceptional Student Services (Special Education and Pupil Appraisal), Supervisor of Human Resources, Supervisor of Information Management, Technology Services, and the Arts, Supervisor of Assessment, Accountability, and Evaluation, Manager of School Food Service, and Business Manager)

List the Position(s) You Are Applying For:

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**Central Office Support Staff** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Accounts Payable Specialist, Coordinator of Employee Benefits and Payroll, Finance Specialist, Payroll Clerk, Purchasing Clerk, Senior Accountant, Main Office and Federal Programs Receptionist, Administrative Assistant to the Superintendent, Administrative Assistant to Supervisor of Federal Programs, and Human Resources Analyst)

List the Position(s) You Are Applying For:

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**Other School Based Certified Positions** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Principal, Assistant Principal, Administrative Dean of Students, Non-Administrative Dean of Students, Professional School Counselor, Librarian, Interventionist Teacher, Behavior Modification Center Teacher, Instructional Coach Numeracy, Instructional Coach Literacy, Numeracy Interventionist Teacher, Literacy Interventionist Teacher, Master Teacher, and Mentor Teacher)

List the Position(s) You Are Applying For:

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**Exceptional Student Services (Pupil Appraisal/Special Education)** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Behavioral Interventionist Specialist/504 Coordinator, Educational Diagnostician, Individualized Education Program (IEP) Facilitator, Response to Intervention (RTI) Coordinator, School Registered Nurse (RN), Licensed Practical Nurse (LPN), School Psychologist, School Social Worker, Special Education Records (SER) Specialist, and Speech Language Pathologist/Speech Therapist)

List the Position(s) You Are Applying For:

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**Support Staff** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Interventionist Paraprofessional, Special Education Paraprofessional, Computer Lab Paraprofessional, Behavior Modification Center Paraprofessional, Bus Driver, Bus Aide, Head Custodian, Custodian, Maintenance-at-Large, Lawn Care Groundskeeper and Maintenance Generalist, Food Service Technician, Food Service Manager, Executive School Secretary, Attendance Clerk, and Guidance Clerk)

List the Position(s) You Are Applying For:

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**Substitute Positions** Either **circle** the position(s) you are applying for **OR list** on the line below.

(Teacher, Paraprofessional, Bus Driver, Food Service Technician, and Custodian)

List the Position(s) You Are Applying For:

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**NOTE for Substitute Positions for Teacher's Retirement System of Louisiana (TRSL):** "Some categories of Substitutes must be enrolled in Teacher's Retirement with retirement benefits taken out of their salary, **if** Category #1: a member has **five or more** years of service credit with TRSL and works as a part-time, seasonal, or temporary classroom teacher (**inclusive of substitute teachers**), earnings must be reported according to R.S. 11:162 (C)(2)(b), **if** Category #2: a member has **ten or more years** of service credit with TRSL and works in a part-time, seasonal, or temporary (**non-classroom teacher**) position, earnings must be reported according to R.S. 11:162(C)(1), and/or **if** Category #3: reporting of retiree earnings are covered in R.S. 11:710, thus **if retirees return to work as a substitute**, they too will need to be enrolled and reported according to applicable return to work provisions in R.S.11:710." Please go to the [www.trsl.org](http://www.trsl.org) website to do any additional research necessary to make an informed decision if you want to apply as a substitute.



## PROFESSIONAL/WORK/TEACHING EXPERIENCE

List all professional experience, all work experience, all military, full time department of education, all PK-12 public, PK-12 private/parochial, and/or full time university teaching experience in chronological order, beginning with your most recent employer. Use additional typed pages if necessary. Do NOT list part time or substitute teaching/work experience.

Dates (mm/yy to mm/yy)	Name of Employer	Address of Employer	Subject and/or Grade Levels Taught (certificated) or Work Experience with Comparable Job Duties of Position(s) Desired (support)	Number of Years
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## LOUISIANA CERTIFICATION \*You may attach your certificate from [www.teachlouisiana.net](http://www.teachlouisiana.net) and write "See Attached" in boxes below

Certificate Type	Certificate Number	Valid Date (mm/dd/yyyy to mm/dd/yyyy) or Life	Year Received, Degree(s), and University on Teaching Certificate	Eligibility: For the following General Areas of Certification and/or Terms

## OTHER JOB CATEGORIES

Please list any other pertinent certifications and/or licensures required for the position(s) being sought:

## LIST OF AT LEAST THREE PROFESSIONAL REFERENCES THAT MAY BE CONTACTED

These will be the references contacted by the Hiring Manager; however, as soon as possible, please submit three letters of reference (teachers may submit three CoBSS Teacher Reference Forms. You should still turn in your application, resume, and cover letter and it is understood that your letters of reference may be submitted later for your application file or personnel file.

Name	Title or Position	Contact Email	Contact Phone Number	How You Are Acquainted

## NATIONAL TEACHER EXAMINATION (NTE) or PRAXIS SCORES

\*You may attach scores from [www.teachlouisiana.net](http://www.teachlouisiana.net) and write 'See attached' in box below: \*

Please list all NTE and/or PRAXIS tests that have been met (passed) with the required cutoff score as set by the BESE and LDOE.

Test Code	Date Taken (m/d/y)	Test Name	Test Score	Required Score

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## REQUIRED INFORMATION

The required information can be 1) hand-delivered to 14750 Plank Road, Baker, LA 70714, 2) mailed through the U.S. Postal Service at P.O. Box 680, Baker, LA 70704, 3) scanned (scan should be clear and not dark or excessively small font) and emailed to Dr. Kimberly Gales-Johnson, Supervisor of Human Resources at [kjohnson@bakerschools.org](mailto:kjohnson@bakerschools.org) with cc: to Mrs. Portia DeCuir at [pdecuir@bakerschools.org](mailto:pdecuir@bakerschools.org), or 4) faxed to 225/774-5797 (Main Office Fax).

- 1) Letter of Intent (known as Cover Letter):** Please attach a typed Letter of Intent (Cover Letter) explaining why you want to teach/work in the CoBSS and your goals for success in the classroom/work setting. Possible structure (does not have to be structured in this manner): one inch margins on all four sides, 12' Times Roman font, full justification for an even right margin with signature in blue ink.
- 2) Professional Resume':** Please attach a brief (one to three pages) typed resume' that follows the tenets of appropriate resume writing. Suggested elements of submitted resume: Demographic Information, Career Objective, Education (start with the highest level attained listed first; use months and years), Experience (start with the most recent job first; use months and year), Memberships and Affiliations, Awards/Honors/Distinctions, and Hobbies and Interests.
- 3) Professional References:** If you are registered with a college/alternative certification program placement service, have your credentials forwarded to our office. If you are not registered, list at least **three** professional references below. New teachers should include names of college professors, cooperating teachers, and supervising teacher. Experienced teachers should include names of principals/supervisors under whom they have worked most recently. Other applicants must list names of supervisors who can attest to their previous or current work experience. **NOTE:** After submission of the a) CoBSS Application, b) Letter of Intent, and c) Resume, applicants should submit three recent reference letters or CoBSS Teacher Reference Forms (teachers only) as soon as possible for a complete file. (SSN is **NOT required** on the CoBSS Teacher Reference Form).
- 4) Other Significant Documents (as applicable):** Certificated teaching applicants should attach copies (unofficial) of your most current and valid **teaching certificate**, PRAXIS scores (from PRAXIS or Teach Louisiana website), and **college transcripts**. Applicants who have eligibility for a Practitioner's License (PL1, PL2, or PL3) should attach copies of their program **Admissions Letter, Plan of Study, unofficial transcripts, and other pertinent documents** to demonstrate evidence of program participation. Paraprofessional applicants must present documentation to demonstrate that they are Highly Qualified in three ways: a) score of at least 450 on the PRAXIS Para Pro Assessment (**Para Pro Scoring Report**), b) at least an Associates degree or higher from an accredited university (**Degree Copy**), or 3) 48 hours of college credit with 3 hours of English composition, 6 hours of English or Reading, 6 hours of Math, with the remaining 33 hours in anything including up to 12 hours of remedial/developmental college classes (**Unofficial college transcripts with highlighted courses**). Academic Interventionist Paraprofessionals and Substitute Teachers must have an undergraduate college degree (**Degree Copy**). Applicants for other job categories, such as, but not limited to School Food Service Technicians and Bus Drivers, must provide required **documents (Licensure and Medical Documents)** as needed for the position. **NOTE:** Space does not allow for all of the requirements for all job categories to be listed.

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## **BACKGROUND DISCLOSURE**

Answering “**Yes**” to any of these questions does not automatically disqualify you from consideration. Please answer each question. If the answer to any of the above questions is “**Yes**,” please explain fully in a typed statement that has been signed and dated.

- 1) Have you ever been convicted of a violation of law other than a minor traffic violation  **Yes** or  **No**
- 2) Have you ever had a professional certificate revoked or suspended?  **Yes** or  **No**
- 3) Have you ever been convicted of any offense for physical or sexual abuse of a child  **Yes** or  **No**
- 4) Have you ever had a charge of child abuse against you substantiated?  **Yes** or  **No**
- 5) Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from the employment of another school district?  **Yes** or  **No** If yes, include name of district, date, and reason for resignation or termination.
- 6) Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from another employer?  **Yes** or  **No** If yes, please give the employer name, date, and reason for resignation or termination?
- 7) Have you ever had a professional license revoked or suspended?  **Yes** or  **No**
- 8) Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review, or investigation of alleged misconduct?  **Yes** or  **No**
- 9) Have you ever left educational or school-related employment when you had reason to believe an investigation for misconduct was underway or imminent?  **Yes** or  **No**
- 10) Are you currently the subject of an inquiry, review, or investigation for alleged misconduct or alleged violation of professional standards of conduct by either an employer or a licensure agency?  **Yes** or  **No**
- 11) Have you ever had an adverse action taken on a professional certificate, license, or charter school registration?  **Yes** or  **No**
- 12) Have you ever been placed on probationary status for alleged misconduct while holding a professional license, certificate, registration, or credential?  **Yes** or  **No**
- 13) Have you ever been denied any professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct?  **Yes** or  **No**
- 14) Have you ever surrendered a professional license of any kind before its expiration?  **Yes** or  **No**
- 15) Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?  **Yes** or  **No**
- 16) Have you ever been the subject of a substantiated report of child abuse or sexual conduct (involving a PK-12 student or minor child)?  **Yes** or  **No**
- 17) Are you currently the subject of an ongoing investigation related to a report of suspected child abuse or sexual conduct (involving a PK-12 student or minor child)?  **Yes** or  **No**



**ATTESTATION**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal employment and other related matters as may be necessary in arriving at an employment decision. Further, I also authorize you to contact my previous employers to request my performance management evaluation results. I am aware that I the right to review the information received and to provide any response or information that I deem appropriate. I have listed all current and former employers who are education providers in the Experience Section of this Employment Application. I authorize my listed references, current and past employers and educational institutions, and anyone else who has information about my work history, education qualification, or fitness to provide such information to the City of Baker School System for which I have completed an Employment Application. I release the City of Baker School System and all persons providing this information to the City of Baker School System from any liability whatsoever for obtaining and providing that information, regardless of the results.

I am aware that the City of Baker School System (CoBSS) is required to provide, upon request, performance management evaluation results of persons that other school systems may wish to hire. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application. Furthermore, it is understood that this application becomes the property of the CoBSS. The CoBSS reserves the right to reject an incomplete application. References and personal information, which become part of this record, are to be regarded as confidential and shall not be revealed to me. **NOTE:** Your application will remain on file for the current school year and according to CoBSS policy; however, the application must be updated each school year if further consideration for a position is desired.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the City of Baker School Board, if employed.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

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

***The City of Baker School Board is an Equal Opportunity Employer.***

**The CoBSS does not discriminate on the basis of race, color, national origin, gender, age, or qualified disability.**

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required Employment Eligibility Verification Document Form upon hire.