



LUNENBURG COUNTY PUBLIC SCHOOLS

P.O. Box 710
Kenbridge, VA 23944

TEACHER APPLICATION SUMMER SCHOOL PROGRAM FOR 2018 JUNE 10, 2019 - JULY 1, 2019

PERSONAL INFORMATION

Name:

Last

First

Middle

Home Address:

Street

City

State

Zip

Home Phone: _____

POSITION INFORMATION (Check all positions for which you are applying and are qualified.)

Areas Preferred:

Grades K-2 (skills-based reading/math)
Grades 3-5 (skills-based reading/math)
Grades 6-8 (skills-based reading/math)

Grades 6-8 (core course content)
High School
Gifted Program

Position:

Site Coordinator
Teacher

Please indicate the number of years of experience you have working with the Lunenburg County Public Schools' Summer school program and what grades/areas you taught:

Preference will be given to teachers with previous commitments to the program, length of time working with summer school, and who possess strengths or endorsements in the content areas needed. There will be one mandatory workday for planning this year on June 10, 2019, to identify specific instructional needs of the students attending. Teachers in the same grade or subject should meet together on this day to create a plan for the 12 instructional days. A copy of this plan must be submitted to the summer school coordinator. Note: July 1, 2019 is an optional workday for teachers if needed.

By signing this application, I understand that I must attend the teacher work day on June 10, 2019, in order to be employed in this program. I also agree to attend the 12 days of the summer program and to attend meetings should the need arise. Per diem rates will be subtracted for absences. All absences will require prior approval.

Applicant's Signature

Date

EDUCATIONAL BACKGROUND *(Current employees of Lunenburg County Public Schools do not have to complete this section.)*

School Name	Location/Address	Dates Attended

CERTIFICATION

Do you have a Virginia Teacher's Certificate?

Yes No

If yes, what grades and/or subject area(s) are you endorsed to teach? (Please list.)

Do you have a Teacher's Certificate from a state other than Virginia?

Yes No

State and date of expiration of your Teacher's Certificate: _____

EXPERIENCE

LUNENBURG COUNTY PUBLIC SCHOOLS:

Present School Assignment	Area of Assignment (List Current Teaching Areas and Grade)	Length of Employment

OTHER SCHOOL DIVISIONS:

Present School Assignment	Area of Assignment (List Current Teaching Areas and Grade)	Length of Employment

Have you been previously employed as a summer school teacher with Lunenburg County Public Schools?

Yes No If yes, which level: High School Middle School Elementary School

If yes, list years: _____

REFERENCES *(Current employees of Lunenburg County Public Schools do not need to complete this section.)* Give names and addresses of three reliable and responsible persons, other than relatives, who know your qualifications for this employment classification.

Reference (No Relatives)	Address	Phone No. (Daytime)

RECOMMENDATION FROM PRINCIPAL (This section is **only** for employees currently under contract to Lunenburg County Public Schools.)

Applicant's Name: _____

School: _____

Current grade and/or subject area: _____

Specific comments: _____

I do recommend

I do not recommend

Principal's Signature

Date

NOTE: APPLICATIONS FROM CURRENT EMPLOYEES MUST BE SUBMITTED THROUGH THE PRINCIPAL.

Lunenburg County Public Schools does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies:

Mr. Sidney Long, Director of Personnel/Curriculum and Instruction/Federal Programs
1009 Main Street
P.O. Box 710
Kenbridge, VA 29344 Phone:
434-676-2467
Fax: 434-676-1000
Email: sidney.long@k12lcps.org

Have you ever been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? (Current employees of Lunenburg County Public Schools do not need to answer this question.) Yes No

I hereby certify that the facts set forth in the above employment application are true to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal or professional history.

Applicant's Signature

Date

Applications must be completed and returned to Mr. Sidney Long by March 29, 2019.