## INSTRUCTOR APPLICATION PRIVATE OCCUPATIONAL SCHOOL PERSONNEL

## **SECTION A**

(Last Name)		(First Name)		(Middle Initial)				
(Mailing Address )	(City, State)	(Zip Code)	(Residence Pho	one) (B	(Business Phone)		(E-mail Address)	
Employing School ) (Address)				(City, State)			(Zip Code)	
DATE EMPLOYED:			Instructor		☐ Program Superviso		r	
		LIST BELOW	THE PROGRAM	IS YOU WILL	BE TEAC	HING		
_								
SECTION B  INCLUDE A PHO	man's card, c	or other forms o	f training do	, training c cuments.		-	e or federal regis	stration,
NAME AND LOCATION OF SCHOO (Including special training and/or military specialty)				DATE ATTENDED	DATE MAJO		CERTIFICATE or DEGREE	DATE
		E TEACHING				_	_	
DATE OF EMPLO FROM (Mo./Yr.) (	MPLOYER	DYER SUBJECT TAUGHT		HT				

## **APPLICABLE OCCUPATIONAL EXPERIENCE**

Please list occupational experience below.

(140	ROM TO (Mo./Yr.)	TOTAL HOURS EMP.	NAME AND ADDRESS OF EMPLOYER DE	ESCRIPTION OF V	WORK PERFORMED
EC	TION C				
teri	<u>e case</u> ( <b>including,</b> ms) <i>is required fo</i>	if applicable, r criminal his	charges and disposition of the case which demonstrates com tory "yes" answers. Have you ever	pletion of any pr	obation or court order
a. b.			ony; or have charges pending under this or another name? sdemeanor, other than a minor traffic violation; or	Yes	_ No
Ď.	are misdemeanor	Yes	_ No		
c.	Been dismissed fr		_ <del></del> _ No		
	Been denied; revo	ked; relinquish	ed; or otherwise prevented from obtaining an instructor crede	ential	
d.		Yes	No		
d.	and/or a profession	mai neemse mi ti	•	. 55	_ 110
d. e.	•		be teaching minors (under the age of 16)?		_ No
e. hereb imple ny of	Will you be teaching you swear, affirm or the to the best of n	ng or expect to otherwise cert ny knowledge.	•	Yes n this application ctor may be den	_ No n is correct and nied or revoked if

## ALL INSTRUCTOR APPLICANTS WHO WILL BE TEACHING MINOR STUDENTS

DATE: \_\_\_\_\_\_ SIGNATURE OF RESIDENT SCHOOL DIRECTOR/ OWNER: \_\_\_\_\_

due diligence and make reasonable inquiry/effort to ensure the accuracy and completeness of the information contained herein.

SCHOOL RESIDENT DIRECTOR/ OWNER NAME PRINTED:

(Students Under 16 Years of Age)

Contact Division staff for guidance on background check procedures and additional application paperwork & fees.