

The Bedford School

Teacher Application

5665 Milam Road / Fairburn, GA 30213

Phone:(770)774-8001 / FAX:(770)774-8005

Name in full: _____ Social Security Number: _____

Address: _____ Phone: _____

_____ E-mail: _____

Date of birth: _____ Marital status: _____

Have you ever been convicted for any crime? _____ If yes, explain: _____

Education and Professional Training:

Name of College/University

Degree &Majors

Dates attended

Do you hold a Teaching Certificate? _____ If yes, State: _____ Date Issued: _____ Date Expires: _____

Type of certificate, including grades and subjects: _____

Please indicate any special licenses, training and/or skills: _____

Please indicate any experience/interest in extra-curricular activities: _____

Teaching Experience:

School	Dates Employed	Position
_____	_____	_____
Address/phone #		

School	Dates Employed	Position
_____	_____	_____
Address/phone #		

School	Dates Employed	Position
_____	_____	_____
Address/phone #		

School	Dates Employed	Position
_____	_____	_____
Address/phone #		

Why do you want to work at The Bedford School? _____

Give at least 3 references, including principals or supervisors, who have knowledge of your teaching abilities, scholarship and/or character.

Name	position	School name, address & phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Submit a copy of your transcript with this application.

Signature _____ Date _____