

**SELIGMAN UNIFIED SCHOOL DISTRICT #40**

For Office Use Only

- Interview Date & Time \_\_\_\_\_
- Letter of Application
- Certificate
- Reference Check
- Transcripts/Credentials
- Criminal Background Check

Diane Pritchett  
 Superintendent  
 P.O. Box 650  
 Seligman, AZ 86337

Phone: 928-422-3233  
 Fax: 928-422-3642

Name: \_\_\_\_\_ SS# \_\_\_\_\_  
                         Last                        First                        MI

Current Address: \_\_\_\_\_  
                                 Street  City                        State                Zip

Permanent Address: \_\_\_\_\_  
                                 Street  City                        State                Zip

Phone: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Certificates held(list subject/ and or areas); send copies of each.

Grade Level/Subject	Expiration Date
_____	_____
_____	_____
_____	_____

Are you currently under contract?	_____ Yes	_____ No
Date available for employment?	_____	

Have you ever been convicted of a crime regarding any situation that could in any way be substantially related to your job duties as an employee of this district? \_\_\_\_ Yes \_\_\_\_ No

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EDUCATION, EXPERIENCE AND TRAINING**

List most recent first

**Teaching Experience**

School and District	Address	Grade/Subject	Dates	Total Years
---------------------	---------	---------------	-------	-------------

---

---

---

---

**Student Teaching Experience**

School and District	Address	Grade/Subject	Dates	Total Time
---------------------	---------	---------------	-------	------------

---

---

**Extracurricular Experience**

School and District	Address	Grade/Subject	Dates	Total Years
---------------------	---------	---------------	-------	-------------

---

---

---

---

---

**College and University**

School Attended	Location	Major	Minor	Degree	Date
-----------------	----------	-------	-------	--------	------

---

---

---

---

**High School attended**

Name and Address

---

**Honors and Activities**

---

---

---

**Other Related Work Experience**

Employer                      Location                      Work Assignment                      Dates    Total Years

---

---

**Professional Memberships**

Organization Name                      Offices or Responsibilities                      Dates

---

---

**Civic, Service and Social Memberships**

Name of group or association                      Offices or Responsibilities                      Dates

---

---

---

**Professional Reference**

Name                      Position                      Address                      Phone

---

---

---