

**TEACHER APPLICATION**

1. Complete the teacher application by keying information into the blanks.
2. Collect the following required supporting documents:
* Current résumé
* Copy of Alabama teacher certificate
* Documentation showing background check requirements are met, including fingerprinting (if not included on teacher certificate)

Email the application packet to:

* Madison City Schools Support Center – Lindsey Barrett – lbbarrett@madisoncity.k12.al.us
1. Ask your principal to write a letter of recommendation, on school letterhead, and mail it directly to your regional support center. Addresses are available at <http://accessdl.state.al.us/contact>. (Please click on your county and then on the right side of the map click on the Support Center’s name.) Your principal’s letter of recommendation must provide information pertaining to your professional qualities/attributes and teaching abilities.
2. You will not be considered for employment until all documentation has been received.
3. Regional support center staff may contact you to schedule a phone interview.
4. Teacher training is by invitation only. Once training is completed, course assignment is not guaranteed.

**For Support Center Use Only:
Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_Date Received\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
\_\_\_\_\_** **Résumé
\_\_\_\_\_Teacher Certification
\_\_\_\_\_Background check
\_\_\_\_\_Principal’s Letter
\_\_\_\_\_Interview Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Notes:**



**Date**

|  |  |
| --- | --- |
| **Name** |       |
| **Home Address** |        |
| **Preferred Phone Contact Number**  |       |
| **Home Email Address**  |       |

 **Do you have high speed internet at home? Y** **[ ]  N** **[ ]**

**What type of computer do you have at home?**

**Current Status: Employed** **[ ]  Retired** **[ ]  Other** **[ ]**

|  |  |
| --- | --- |
| **School System and School Name (if employed):** |       |
| **School Phone**  |       |
| **School Email Address** |       |

 **Alabama Teacher Certificate Number**

| **List courses you are qualified to teach (including AP). Include the *number* of years of teaching experience you have in each of these courses.** |
| --- |
| **COURSE** | **NUMBER OF YEARS** | **COURSE** | **NUMBER OF YEARS** |
|       |       |       |       |
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| **List the names and contact information of three (3) professional references in the space provided. .below.** |
| **NAME** | **RELATIONSHIP** | **TELEPHONE** |  **EMAIL ADDRESS** |
|       |       |       |       |
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 ***As an ACCESS teacher, you will be required to attend online faculty meetings and participate in ongoing ACCESS professional development.***