



# CERTIFICATION

## WORK EXPERIENCE

List employment in chronological order, starting with the most recent position. Include teaching, administrative, and employment other than education.

Employer's Name, Address, Telephone Number	Employed		Job Description, Title, or Position	Reason for Leaving
	from	to		

## U.S. MILITARY RECORD

Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

Branch \_\_\_\_\_ Initial Rank \_\_\_\_\_ Final Rank \_\_\_\_\_

**ADDITIONAL INFORMATION** (exclude religious, racial, political, or labor organizations)

Scholastic Honors \_\_\_\_\_  
\_\_\_\_\_

Positions of Professional Leadership \_\_\_\_\_  
\_\_\_\_\_

Community Participation During the Last Five Years \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other Professional Experiences (educational, travel, lecturing, publications, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Interest and Hobbies \_\_\_\_\_  
\_\_\_\_\_

**REFERENCES** (include professional and character references)

Name	Address	Position	Telephone Number

**SUBJECTIVE INFORMATION**

(Please describe the factors in your life which you believe have contributed to your strength as an administrator/supervisor.)

1. I hereby authorize BCIU to contact school, college, employment and all other sources for the purpose of investigating and verifying statements and references herein, and I hereby authorize said sources to disclose such records and other information as may be requested by the prospective employer.
2. I understand that any false statements in this application may be sufficient cause for discharge if I am employed.
3. I understand that any offer of employment is conditioned upon my successfully passing a drug abuse screen.
4. The position holder must be able to perform the essential job functions with or without reasonable accommodation. It is the responsibility of the employee to inform the BCIU Director of Human Resources of any and all reasonable accommodations that will be required.

**(ATTACH ADDITIONAL DOCUMENTS IF NECESSARY)**

\_\_\_\_\_  
*Signature of Applicant*