

APPLICATION FOR PROFESSIONAL STANDARDS COMMISSION

Name _____ School _____

Home Address _____ Sch. Address _____

City _____ Zip Code _____ City _____ Zip _____

Home Ph. _____ Sch. Ph. _____

E-mail Address _____

PSC Position applied for: (check one)

- (a) ___ Secondary classroom teacher (b) ___ Elementary classroom teacher
(c) ___ Special education teacher (c) ___ Pupil personnel services
(d) ___ Exceptional child education

PROFESSIONAL INFORMATION

Current certificate(s) [Include endorsements with expiration dates]

Type	Expiration Date
_____	_____
_____	_____
_____	_____

Education Background [Degrees and places obtained]

Degree	School
_____	_____
_____	_____
_____	_____

Professional Experience [Date, place and position]

Date	Place	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

Professional Associations and related activities other than IEA/NEA (including offices)

Community Involvement (Please list all community service or other community activities in which you have been involved and dates)

The Professional Standards Commission meets as many as six (6) times a year. Each meeting spans two days. Additionally, Commission members may be asked to attend public meetings, attend State Board of Education meetings, and present at regional or state meetings. Will you be able to give the required yearly time to this position? YES ___ NO ___.

Applicant's signature _____

Please attach resume, three (3) references, and statement of commitment to the profession.

Please keep file active
1 yr _____ 2 yr. _____ NO _____.

1/07