



## Application for Employment

Please complete the following application and mail it to:

Voyager Academy  
4238 Technology Drive  
Durham, NC 27704

### Personal Information

*Please print clearly*

Name \_\_\_\_\_  
Last Name First Name Middle/Maiden Name

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Present Address \_\_\_\_\_  
Street City State Zip

Present Telephone Number (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

*Complete only if your present address is not your permanent address:*

At present address until \_\_\_\_/\_\_\_\_/\_\_\_\_

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

Permanent Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mobile Telephone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email \_\_\_\_\_

Position Applying For \_\_\_\_\_ (If Teacher) Grade/Subject Desired \_\_\_\_\_

Do you hold a valid North Carolina Teachers License? No Yes - please provide a copy with application

Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_ Years of teaching experience \_\_\_\_\_

Areas in which you are certified to teach \_\_\_\_\_

Other states in which you hold a valid teacher license/certificate \_\_\_\_\_

Are you legally eligible for employment in the United States?  Yes  No

Date available to begin employment \_\_\_\_/\_\_\_\_/\_\_\_\_

## Employment History

*Begin with your most recent position and include your entire work history. For additional space, use a separate sheet of paper. Include student teaching if completed within the past three years. A resume may be substituted for completing this information.*

Begin Date ____ / ____ / _____	End Date ____ / ____ / _____
Position Title _____	Employer/Company _____
Supervisor _____	Phone (____) ____ - _____
Description of work _____ _____	
Reason for leaving _____ If this is your present employer, may we contact them? __ yes __no	

Begin Date ____ / ____ / _____	End Date ____ / ____ / _____
Position Title _____	Employer/Company _____
Supervisor _____	Phone (____) ____ - _____
Description of work _____ _____	
Reason for leaving _____	

Begin Date ____ / ____ / _____	End Date ____ / ____ / _____
Position Title _____	Employer/Company _____
Supervisor _____	Phone (____) ____ - _____
Description of work _____ _____	
Reason for leaving _____	

Begin Date ____ / ____ / _____	End Date ____ / ____ / _____
Position Title _____	Employer/Company _____
Supervisor _____	Phone (____) ____ - _____
Description of work _____ _____	
Reason for leaving _____	

## Education

Level of Education	Name of School or University	State	Field of Study	Type of Degree	Dates of Attendance (From month/year To month/year)
High School or GED					
Business or Trade School					
College/University					
College/University					
College/University					

## References

Please provide the names of three individuals, not related to you, who can provide information about your work performance.

Name of Reference (include title, position, company or school)	Complete Address (City, State, Zip)	Telephone Number	Nature of Relationship

**\*\*Please provide any additional information that you believe would be valuable in our assessment of your application for employment.**

## Conditions of Employment

All North Carolina Charter Schools are equal opportunity employers and do not discriminate on the basis of race, color, religion, gender, age, disability, or national origin.

### **Consumer Notification – Consumer Reports**

You are hereby notified that a consumer report or an investigative consumer report may be obtained from a consumer-reporting agency, other agency, or directly by this employer for the purpose of evaluating you for employment, promotion, reassignment, or retention as an employee. The report may contain information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living from public or private record sources, or through personal interviews with your neighbors, friends, associates, or educational facility. You have the right to make a request of the Consumer Reporting Agency to receive the information in its files on you at the time of your request. They will require proper identification and the payment of any authorized fees.

**PLEASE PLACE A CHECK ON THE APPROPRIATE LINE: If you answer “Yes” to any of the questions below, please provide a detailed explanation on a separate sheet of paper.**

Yes	No	
___	___	<i>Have you ever been denied a teaching certificate or had a teaching certificate suspended or revoked?</i>
___	___	<i>Have you ever been suspended or dismissed from a job?</i>
___	___	<i>Have you ever been asked to resign from your job in the face of possible adverse employment action?</i>
___	___	<i>Have you ever had an employment contract not renewed or not extended at the end of the contract?</i>
___	___	<i>Have you ever received a below standard or unsatisfactory rating on a job performance evaluation?</i>
___	___	<i>Have you ever been placed on an action plan (mandatory improvement plan) or been told that you would be required to complete an action plan?</i>
___	___	<i>Have you ever been found guilty of any violation of law other than a minor traffic ticket? (If you have been convicted of writing worthless checks, driving while impaired, or driving while license revoked, you must answer “yes” to this question.)</i>
___	___	<i>Have you ever pleaded guilty, pleaded no contest, received a Dismissal with Leave, a Prayer for Judgment, a Prayer for Judgment (continued), or entered into a Deferred Prosecution agreement for any charged violation of the law other than a minor traffic ticket?</i>
___	___	<i>Do you have criminal charges or procedures pending against you?</i>
___	___	<i>Are you currently under an obligation to perform or have you ever performed community service?</i>
___	___	<i>Are you currently on, or have ever been sentenced to, supervised or unsupervised probation?</i>

### **Fair Labor Standards Act of 1938**

I do hereby acknowledge that as part of the terms and conditions of my employment with Voyager Academy, I understand that I may be required to work more than forty hours in a workweek. If I am considered a nonexempt employee, I further understand that, in lieu of overtime compensation, I will receive compensatory time off at the rate of one and one-half hours for each hour of employment for which the Fair Labor Standards Act of 1938 requires overtime compensation.

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

Date \_\_\_\_\_

*I, the undersigned applicant/employee hereby expressly authorize Voyager Academy’s Board of Directors, its agents, and its employees to make any investigation of my personal or employment history, expressly including, but not limited to, federal and/or state criminal law enforcement, or traffic records, which may include confirmation by fingerprint identification. I further authorize any former employer, person, firm, corporation, credit agency, administrative body, or governmental agency to give to the Board of Directors, its agents, or its employees any information they may have regarding me. In consideration of the review of my employment application by the Board of Directors, its members, officers, agents, or its employees, I hereby release the Board of Directors to which this application is submitted and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. If employed, I further authorize this Board of Directors or its agents to provide information about my employment in this school system to future employers or prospective employers. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed original. I have read the information contained in the application carefully and certify that the information I have given is correct and complete. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.*

Signature \_\_\_\_\_

Date \_\_\_\_\_