



PEE DEE ACADEMY

Academic and Athletic Excellence

PO Box 449

Mullins, SC 29574

843-423-1771

Application for Faculty Employment

Name: _____ Birthdate: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Are you married? Yes or No

If married, what is your spouse's occupation? _____

Number of Children: _____ Age(s) of Children: _____

What position are you currently seeking? _____

Do you hold a valid teaching certificate? Yes or No

State of Certification: _____ State Certificate Number : _____

If yes, what is your field(s) of certification? _____

When does your certificate expire? _____

If you are not certified, what was your college major and/or minor? _____

If hired, please check the activities you would be willing to teach/coach/sponsor:

- | | | | |
|---|------------------------------------|--|---|
| <input type="radio"/> Art | <input type="radio"/> Baseball | <input type="radio"/> Football | <input type="radio"/> Girls Basketball |
| <input type="radio"/> Boys Basketball | <input type="radio"/> Chorus | <input type="radio"/> Drama | <input type="radio"/> Track/Cross Country |
| <input type="radio"/> Music | <input type="radio"/> Cheerleading | <input type="radio"/> Student Council | <input type="radio"/> Publications |
| <input type="radio"/> Soccer | <input type="radio"/> Tennis | <input type="radio"/> After-school daycare | |
| <input type="radio"/> Other (please specify): _____ | | | |

What school activities have you sponsored as a faculty advisor? _____

Past Teaching Experience(s):

Where	Year(s) Taught	Subject and Grade

Educational Background:

College or University	Degrees Earned

References (you must supply 3 references):

Name of Reference	Address and/or Phone Number

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

Signature _____

Date _____

Printed Name _____