

# Brainworks Teacher Application

Date \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Social Security #: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Teaching Credentials: \_\_\_\_\_

Experience:

Year	Institution	Degree or Certification	Major/Minor

From	To	School	Phone	Principal	Subjects

Honors:

Academic: \_\_\_\_\_

Professional: \_\_\_\_\_

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**Skills:**

1. Diagnostic Testing

Experience: \_\_\_\_\_  
\_\_\_\_\_

2. Describe yourself as an organized person. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Community Activities: \_\_\_\_\_

\_\_\_\_\_

Hobbies and Interests: \_\_\_\_\_

\_\_\_\_\_

Salary Needs: \_\_\_\_\_

Available Hours (Days and Time): \_\_\_\_\_

\_\_\_\_\_

Courses you have had in gifted and/or special education and your grades: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are some specific characteristics of gifted children other than high IQ? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How do the emotional needs of the gifted differ from children of average intelligence?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What factors might lead to underachievement? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Page Three**

How have you taught thinking skills in your classroom? \_\_\_\_\_

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Who is your favorite gifted or special education authority, and what intrigues you about that person's work? \_\_\_\_\_

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What training do you have for working with students who have learning disabilities?

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What type of modifications have you made in your classroom to meet the needs of LD students? \_\_\_\_\_

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Why do you like the teaching profession \_\_\_\_\_

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When could you start if hired? (Schedule) \_\_\_\_\_

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What conflicts would you have Monday - Saturday? \_\_\_\_\_

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What conflicts would you have in the summer? \_\_\_\_\_

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Are you willing to work on writing projects and give workshops in your field of experience?

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Is there a minimum number of hours per week you must have? \_\_\_\_\_

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Define \_\_\_\_\_

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**TEACHING REFERENCES**

**List people who can discuss your teaching skills.**

Name	Institute	Phone
1.		
2.		
3.		

How does this person know you?

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

How do you feel you can be an asset to the Brainworks program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long are you interested in part-time employment? \_\_\_\_\_  
\_\_\_\_\_

What would you like to be doing two years from now? \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of or pleaded no contest to a felony within the last five years?

No: \_\_\_\_\_ Yes: \_\_\_\_\_ If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of, pleaded guilty to, or pleaded no contest to, an act of dishonesty, or breach of trust or moral turpitude, such as misdemeanor petty theft, burglary, fraud, writing bad checks, and other related crimes within the last five years?

No: \_\_\_\_\_ Yes: \_\_\_\_\_

Are you willing to undergo a background screening? No: \_\_\_\_\_ Yes: \_\_\_\_\_

I declare the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that if employed, any falsification, misstatement, or omission of fact in connection with my application, whether on this document or not, may result in immediate termination of employment. I authorize you to verify any and all information provided above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_