

## MCS EMPLOYMENT APPLICATION

7917 Montrose Road \* Potomac, MD \* 20854 \* (301)340-6713 \* Fax (301) 340-7339

Name \_\_\_\_\_ Date \_\_\_\_\_

Subject \_\_\_\_\_ Grade Level \_\_\_\_\_

Licensed Area \_\_\_\_\_

**Position Interest**     Pre-Kindergarten     Elementary K-4     Middle 5 – 8  
 High School 9-12     Administration     Guidance

### Personal Data

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone No. \_\_\_\_\_ Business Telephone No. \_\_\_\_\_

Mobile Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Languages spoken other than English \_\_\_\_\_

### TEACHING COMPETENCIES

List other subjects that you are qualified to teach:

List any activities you are willing to direct, i.e. plays, debates, school clubs, etc.

List any sports you are willing to coach, i.e. intramurals, volleyball, football, etc.

My assignment preference is: ( ) Full-time    ( ) Part-time    ( ) Substitute

I will be available to start teaching on the following date: \_\_\_\_\_

List and give the extent of any special training you have had that is not mentioned above. Complete in as much detail as possible; also please provide proof of any training.

- Child Abuse Training (K-6)     Art     Remedial Reading     ESOL  
 Remedial Mathematics     Special Education

### CERTIFICATION

Teaching Certificate or License you hold	Date Issued	Date of Expiration	Certificate/License Number	Subject or Grades Appearing on Certificates/License

### EDUCATION

List colleges, universities, and training institutions attended:

Dates Attended	School & Location	Degree	Degree Date	Major & Minor	Grade Average
		Diploma			
		Diploma			

Distinction & Honors:

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## TEACHING EXPERIENCE

Name of School City and State	Grades & Subjects Taught	Supervising Teacher/ Phone Number	Dates

List participation within the last two years in any professional activity for the improvement of the school(s) where you have been employed: e.g. Curriculum Revision, Pupil Progress Reports, etc.

## OTHER EXPERIENCE

List all previous non-teaching work. List chronologically with the most recent position first

Name of Employer	Address/Phone	Supervisors name & phone number	Type of Work	Dates

## PROFESSIONAL REFERENCES

Please include administrators with whom you have worked, or teachers who supervised your student teaching.

Name	Address & Telephone No.	Position or Occupation

Have you ever been convicted of a felony? [ ] Yes [ ] No

If yes,

Explain \_\_\_\_\_

### NOTIFICATION

I hereby authorize the MCS to obtain from my former employers all data needed to support this application. I certify that all information on this application is true and complete to the best of my knowledge and I understand that any withholding or falsification of information on this application is grounds for dismissal.

Applicants Signature \_\_\_\_\_

Date \_\_\_\_\_

**NOTE:**

As part of the teaching of the students of the Islamic community of MCS and as a condition of employment, the teacher (a) undertakes to follow in school a lifestyle and deportment in harmony with Islamic teaching and principles; and, (b) agrees to take further instruction or training from time to time to update and maintain competence in teaching and further understanding of the Islamic faith and culture of the Muslim community.

It is understood that a teacher other than Muslim is not expected to participate in the Islamic practices, but is required to participate and provide visible support of school religious celebrations.