Application for: IRT/Resource Teacher/Counselor, Media Generalist, Counselor, Reading Specialist

CLEAR FORM MCPS

Department of Recruitment and Staffing
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850

PART I: TO BE COMPLETED BY APPLICANT. Please print or type.

INSTRUCTIONS: This application must be supplemented by reference forms (MCPS Form 430-48) from principal, IRT/resource teacher, or instructional specialist, and coordinators/supervisor. Forward original copy to the Director. For additional instructions and information, contact the Director of Recruitment and Staffing.

☐ Dr. ☐ Ms. ☐ Mrs. ☐ Miss ☐ Mr.	**EMPLOYEE # OR LAST 4 DIGITS OF SSN**	**SCHOOL/DEPARTMENT**
Name (Last, First, Middle		

SEX:	**RACE/ETHNIC GROUP (optional):**
☐ Male ☐ Female	☐ American Indian or Alaskan Native ☐ Asian/Pacific Islander ☐ Black (not of Hispanic origin) ☐ Hispanic ☐ White (not of Hispanic origin) ☐ Other

SEMESTER HOURS IN SUBJECT AREA	**SCHOOL OR OFFICE PHONE**	**HOME PHONE**

DEGREE STATUS	**CERTIFICATION STATUS**	**TEACHING EXPERIENCE**	Total years in Montgomery County Public Schools
☐ Bachelor's ☐ Master's ☐ Master's Equivalent ☐ Master's + 30 hours ☐ Master's + 60 hours	☐ Provisional Certificate ☐ Standard Professional Certificate ☐ Advanced Professional Certificate	Years in Elementary _____ Years in Middle School _____ Years in High School _____ **Total Years Experience** _____	_____

REQUESTS: Teaching Assignment:

☐ IRT and/or Resource Teacher/Counselor ☐ Media Generalist ☐ Counselor ☐ Reading Specialist

☐ Requested Subject:

CLUSTER NAME					
406	Bethesda-Chevy Chase	815	John F. Kennedy	104	Seneca Valley
757	Montgomery Blair	510	Col. Zadok Magruder	503	Sherwood
321	James Hubert Blake	201	Richard Montgomery	798	Springbrook
602	Winston Churchill	246	Northwest	545	Watkins Mill
249	Clarksburg	796	Northwood	427	Walt Whitman
701	Damascus	315	Paint Branch	782	Wheaton
789	Albert Einstein	152	Poolesville	234	Thomas S. Wootton
551	Gaithersburg	125	Quince Orchard		
424	Walter Johnson	230	Rockville		

Comments (reason for applying):

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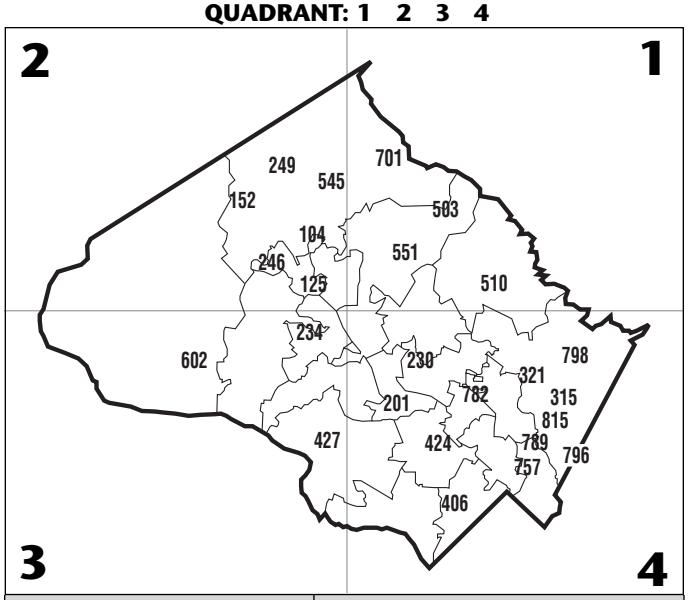
_____ _____/_____/_____
Signature, Applicant *Date*

QUADRANT: 1 2 3 4



LOCATION QUADRANT	**SCHOOL LEVEL**
☐ 1 ☐ 2 ☐ 3 ☐ 4	☐ Elementary ☐ Middle ☐ High ☐ Any

*This information is requested for the Department of Recruitment and Staffing use only in order to assist us in complying with EEO reporting guidelines. Since this information will not be considered for employment purposes you may elect not to furnish this information until an employment offer is confirmed.