



GIBBSBORO ELEMENTARY SCHOOL DISTRICT

Grades PS through 8

EMPLOYMENT APPLICATION

DATE: _____

NAME: _____
LAST FIRST MI

ADDRESS: _____
STREET CITY STATE ZIP CODE

PHONE: H _____ EMAIL: _____
C _____

POSITION(S) APPLYING FOR: _____

PRESENT POSITION/STATUS: _____

DATE OF AVAILABILITY: _____

CERTIFICATION(S) HELD: _____

YEARS OF PRIOR EXPERIENCE: _____

YEARS IN NEW JERSEY: _____

LIST COLLEGE ACTIVITIES, HONORS, ETC. _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME: YES NO

If yes, please explain: _____

Gibbsboro Elementary School District is an Equal Opportunity Employer
Page 1 of 3

Together Everyone Achieves More

EDUCATION

Name of School & Location (including High School, College, Graduate, Other)	Dates	Semester. Credits	Degree or Diploma	Major/Minor Credits

EXPERIENCE

Name of School and/or Company & Location	Dates	Number of Years	Nature of Work (List Grades/Subjects Taught)

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Page 2 of 3

REFERENCES



GIBBSBORO ELEMENTARY SCHOOL DISTRICT

37 Kirkwood Rd. Gibbsboro, NJ 08026 • Phone (856) 783-1140 Fax (856) 783-9155 • www.gibbsboroschool.org

List at least three (3) names and contact information of persons qualified to give any information to show your fitness for the position you are seeking. Please include Superintendents and Principals under whom you have taught/worked.

Name	Address	Telephone
Credentials are on file at:		

Please add any information you believe will assist in arriving at a true estimate of your qualifications:

Please submit this application to:

Mr. Jack Marcellus
 Superintendent of Schools
 Gibbsboro Elementary School District
 37 Kirkwood Rd.
 Gibbsboro, NJ 08026

Falsification of the Employment Application, Resume or Interview Documents will Result in Forfeiture of the Position

I certify that all the information provided in this application and attached resume is true to the best of my knowledge and belief.

Applicant's Signature

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 Page 3 of 3



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