

**REGION III SPECIAL EDUCATION COOPERATIVE**  
1800 STOREY LANE  
COTTAGE HILLS, IL 62018

**APPLICATION FOR EMPLOYMENT**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_

**PLEASE INCLUDE RESUME, TRANSCRIPTS, AND CERTIFICATE IF APPLICABLE.  
OFFICIAL TRANSCRIPTS WILL BE REQUIRED PRIOR TO EMPLOYMENT.**

**REGION III IS AN EQUAL OPPORTUNITY EMPLOYER  
AND WILL NOT DISCRIMINATE BASED ON SEX, AGE, RELIGION OR DISABILITY**

1. List title/grade of certificate(s) or license(s) you hold: \_\_\_\_\_  
\_\_\_\_\_
2. Social Security Number: \_\_\_\_\_
3. Have you ever been released from a position? \_\_\_\_\_ Where: \_\_\_\_\_
4. If Yes, state the reasons: \_\_\_\_\_
5. When would you be available for employment: \_\_\_\_\_
6. Present Employment: \_\_\_\_\_
7. Please state below why you wish to work with Region III Special Education Cooperative:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Add any additional information which you believe will assist in determining whether you should be employed by Region III Special Education Cooperative: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(OVER)

**EDUCATION PREPARATION:**

Name of and Location of School (Include high school, college and graduate work since last degree)	Year of Graduation	Semester Hours	Degree or Diploma

**WORK EXPERIENCE:**

Name and Location of Employer	Begin Date	End Date	Work Responsibilities/Duties Performed (Class, level, subjects, extra-curricular)

**REFERENCES:** (These should be persons qualified to give any information to show your fitness for the position you seek. Please include superintendents or principals under whom you have worked)

Name	Occupation	Address	Phone