

Virginia Governor's School for Agriculture 214 Litton Reaves Hall (0343) Blacksburg, Virginia 24061 540/231-6836 Fax: 540/231-3824 www.alce.vt.edu/governors-ag-school/

The Virginia Governor's School for Agriculture is seeking qualified applicants for Teaching Assistant positions for the summer 2017 program. Days of work will be June 21st to July 23rd.

If interested in this unique learning opportunity please complete the employment application as shown here, submit a resume and a cover letter stating your interests and qualifications for the position. A brief overview of the responsibilities of the Teaching Assistant is shown below.

Submit all required documents to: Virginia's Governor's School for Agriculture 214 Litton-Reaves hall (0343) Blacksburg, VA 24061 Phone: 540-231-6836 Fax: 540-231-3824 Email: agschool@vt.edu

## **Overview of Teaching Assistant Responsibilities**

The Governor's School Teaching Assistant (TA) is the heart of the Governor's School for Agriculture. The TA (also known as GSLs) is the person who interacts on a continuing and personal basis with small numbers of GSA students providing instruction, mentorship, and assistance to the Scholars. TA's will be selected for their academic ability, enthusiasm, potential as instructional assistants, and leadership. Other roles include providing administrative and other support as directed by the Director or Site Director.

The TA plays a critical role in ensuring the Student Code of Conduct is adhered to at all times. Additionally, the TA plays a critical role in the personal safety of the Scholars.

Sincerely, Curtis Friedel, Ph.D. Director, Governor's School for Agriculture

- Invent the Future

VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY An equal opportunity, affirmative action institution

## APPLICATION FOR EMPLOYMENT VIRGINIA GOVERNOR'S SCHOOL FOR AGRICULTURE VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY 436 LITTON REAVES HALL BLACKSBURG, VA 24061

(540) 231-6836

The Virginia Governor's School for Agriculture is an equal Opportunity employer. We encourage all persons to file applications with us. We and Virginia Tech do not discriminate against employees, students, or applicants on the basis of race, sex, disability, age, veteran status, national origin, religion, political affiliation or sexual orientation.

All job offers are contingent upon the successful completion of a background process, which may include a police records check.

Please print legibly, this application is part of the examination process, resume must be attached, but is no substitute for completing this application.

PRINT EXACT TITL POSITION YOU ARE	-			Date of Birth / /	
PRINT FULL NAME				CONTACT INFORMATION	
				HOME PHONE ( ) -	
(LAST)	(FIRST)	(MIDDLE INITIAL)		CELL () -	
ADDRESS				E-MAIL DRIVER'S LICENSE	
ADDRESS				NUMBER	
				NUMBER	
(NUMBER)	(STREET)	(APT. NO.)		STATE	
				EXPIRATION DATE / /	
(CITY)	(STATE)	(ZIP CODE)		RESTRICTIONS	
		ARE YOU CITIZENS (		WHAT LANGUAGES OTHER THAN ENGLISH DO	
			$\square$ NO	YOU SPEAK AND UNDERSTAND FLUENTLY?	
		IF NO ARE YOU A LEGA	L ALIEN?		
			$\square$ NO		
		OF A MISDEMEANOR OR FELONY	BY A COURT OF	ARE YOU RELATED TO ANYONE WORKING FOR	
LAW OR A MILITAI	RY TRIBUNAL?			THE GOVERNOR'S SCHOOL OR VIRGINIA TECH?	
				$\Box$ YES $\Box$ NO	
$\Box$ YES $\Box$ NO				IF YES, NAME OF RELATIVE	
IF YES, GIVE DETAILS BELOW. EMPLOYMENT WILL DEPEND UPON THE NATURE OF THE OFFENSE. AND THE CONDUCT OF THE APPLICANT SINCE THE OFFENSE WAS			RELATIONSHIP DEPARTMENT		
COMMITTED.	D THE CONDUCT	OF THE AFFLICANT SINCE IN	E UFFENSE WAS	DEFACTIVIENT	
DAT	E	CITY AND STATE	OFFENSE	PENALTY OR DISPOSITION	
/ /					

EDUCATION			
CHECK CURRENT LEVEL	NAME AND LOCATION OF HIGH SCHOOL		
□ FRESH □ SOPH □ JUNIOR □ SENIOR □ GRAD			
POST-SECONDARY INSTITUTIONS ATTENDED	ATTENDANCE DATES	MAJOR	DEGREE
		MINGOIN	DEGINEE

US ARMED FORCES			
BRANCH OF SERVICE	YEARS OF ACTIVE DUTY	DATE OF SEPARATION FROM ACTIVE DUTY	RANK

EXPERIENCE: LIST YOUR PRESENT OR MOST RECENT JOB RECENT EMPLOYMENT. IF YOU NEED MORE		
MAY WE CONTACT YOUR PRESENT EMPLOYER?  YES	□ NO IF 'NO' EXPLAI	N:
NAME OF EMPLOYER		DUTIES
ADDRESS		
NAME OF SUPERVISOR		
PHONE ( ) - EXT.		
FROM: MONTH/YEAR TO: MONTH/YEAR	REASONS FOR LEAVING	JOB TITLE
NAME OF EMPLOYER		DUTIES
ADDRESS		
NAME OF SUPERVISOR		
PHONE ( ) - EXT.		
FROM: MONTH/YEAR TO: MONTH/YEAR	REASONS FOR LEAVING	JOB TITLE
NAME OF EMPLOYER		DUTIES
ADDRESS		
NAME OF SUPERVISOR		
PHONE ( ) - EXT.		
FROM: MONTH/YEAR TO: MONTH/YEAR	REASONS FOR LEAVING	JOB TITLE
NAME OF EMPLOYER	·	DUTIES
ADDRESS		
NAME OF SUPERVISOR		
PHONE ( ) - EXT.		
FROM: MONTH/YEAR TO: MONTH/YEAR	REASONS FOR LEAVING	JOB TITLE

REFERENCES: PROVIDE THREE REFERENCES				
POSITION/INSTITUTION/COMPANY	ADDRESS	PHONE		

I HEREBY CERTIFY THAT ALL STATEMENTS MADE IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE, AND I UNDERSTAND THAT FALSE STATEMENTS ARE CAUSE FOR REJECTION OF APPLICATION, REMOVAL OF NAME FROM ELIGIBLE LIST OR DISMISSAL FROM POSITION WITH THE GOVERNOR'S SCHOOL FOR AGRICULTURE.

SIGNATURE OF APPLICANT

DATE SIGNED