



BROKEN ARROW PUBLIC SCHOOLS 2024 EXTENDED SCHOOL YEAR

COMPLETE AND SUBMIT TO MICHELE HUEBERT (MHUEBERT@BASCHOOLS.ORG)
EMPLOYEE INFORMATION

Name: _____ Date: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Present Assignment: Site: _____ Position: _____

Requested ESY Position: _____

Current Certifications: CPR First Aid MANDT

TEACHING INFORMATION *(certified staff only)*

OK Teaching Certificate Number: _____ Years of Experience: _____

Certification Areas: _____

QUALIFICATIONS

Please list the qualifications and training that you have for the position requested:

Employee Signature

Date

YOU WILL BE CONTACTED BY SPECIAL SERVICES ABOUT THE STATUS OF YOUR REQUEST

Broken Arrow Public Schools Human Resources Department 701 South Main Street Broken Arrow, OK 74012

Fax: 918.258.0493