## Putnam County R-1 Schools

803 South 20th Street

Unionville, MO 63565

660-947-3361

**AN EQUAL OPPORTUNITY EMPLOYER**

Applicants are considered for all positions without regard to race, color, religion, sex; national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

INFORMATION FOR THE APPLICANT: Please complete all items on this application form accurately and in detail. You should request your college placement office to forward your up-to-date credentials, and a copy of your transcript. Personal interviews are required prior to consideration for employment. This application will remain on file for a two-year period. If you wish to be considered for employment following that time you must re-apply.

1. First Name:       Middle Name:       Last Name:

Other Names Under Which Records Might Appear:

1. Street Address

City       State       Zip Code

Telephone

1. Name and address of someone who will always know your address (Do Not list spouse)

Name

Street Address

City       State       Zip Code

Telephone

1. Area(s) for which you wish to be considered for employment. You may check more than one area. **Do not check or list any area for which you cannot be certified.**

[ ] Elementary Classroom (K-5) [ ] Other Elementary Areas [ ] Middle School (6-8)

Preference:

[ ] Elementary Art [ ] Special Education [ ] High School (9-12)

[ ] Elementary Instrumental Music

[ ] Elementary Vocal Music

[ ] Elem. Physical Education

[ ] Administration (Specify Areas)

1. Are you willing to accept after school responsibilities? [ ]  YES [ ]  NO
2. What activities do you feel qualified to sponsor or coach?

1. SECONDARY SCHOOL(S) ATTENDED

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of School | City/State | Appx. Number Students | Number Years Attended | Graduation Date |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

List activities in which you participated and any honors received:

1. UNDERGRADUATE INSTITUTIONS

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of School Attended | City/State | Number Months Attended | Dates | Date of Graduation | Degree | Semester Hours Credit |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

Major:       Number of Semester Hours:

Minor:       Number of Semester Hours:

List activities in which you participated and any honors received:

1. GRADUATE INSTITUTIONS

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name of School | City/State | Number Months Attended | Dates | Date of Graduation | Degree | Semester Hours Credit |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |
|       |       |       |       |       |       |       |

Course of Study:

[ ] Master’s [ ] Specialists [ ] Doctorate

1. Social Security Number
2. Missouri Retirement System Number
3. Are you a United States citizen? [ ] YES [ ] NO
4. Missouri Certification Information

|  |  |  |
| --- | --- | --- |
| Certification Area | Grade Levels | Life or Date Expires |
|       |       |       |
|       |       |       |
|       |       |       |

1. List any additional information you think would be helpful concerning your knowledge, skills and experience relating to the job for which you are applying.

1. Briefly state what you feel you can contribute as an employee for the Putnam County R-1 School District in the position for which you are applying.

1. Have you ever been involuntarily terminated or asked to resign from the employment of another school district? [ ] YES [ ] NO If yes, please give the name of the district, the date and the reasons for the termination or request for resignation.

1. Have you ever been refused tenure or a continuing contract? [ ] YES [ ] NO If yes, please explain:
2. Are you aware of any reason you would not be able to perform the duties required of the position for which you are making an application? [ ] YES [ ] NO If yes, please explain:

1. Estimate your total absence from work or school the last three years and explain the reason.

1. Have you ever been convicted of any offense involving violent crimes, stealing, sexual molestation, physical or sexual abuse or rape? [ ] YES [ ] NO If yes, explain:

(Conviction of a crime is not an automatic bar to employment; the district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.)

1. PROFESSIONAL EXPERIENCE

Starting with the most recent year, list each complete year of full-time teaching or administration experience. DO NOT list partial years, student teaching, para-professional experience, substitute teaching, graduate teaching assistantships, or college teaching.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Complete Years | Number Months | School Address | Assignment | Reason for Leaving |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |
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|       |       |       |       |       |

1. Are you presently under contract with any school district for the next school year?

[ ] YES [ ] NO

1. WORK EXPERIENCE OTHER THAN TEACHING

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of Firm, Institution, Association or Organization | City/State | Period of Service | Type of Work | Reason for Leaving |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

1. REFERENCES

Give full name, addresses, and phone numbers of three references. These should be persons who are qualified to answer questions concerning your fitness for the position you seek. Include especially supervisors, principals and superintendents under whom you have taught. If you have not taught previously include the names of instructors who have supervised your student teaching. Indicate with an (\*) any reference listed, which is included in your credentials.

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Present Address | Phone Number | Official Position and Date Acquainted |
|       |       |       |       |       |
|       |       |       |       |       |
|       |       |       |       |       |

**AGREEMENT**

I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of the application or termination of employment. Furthermore, it is understood that this application and records become the property of the District, which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the District now in force and effect or as they may change during my employment, if I am employed by the District. I also hereby authorize the District to conduct a background investigation and authorize release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to such information, and without limitation hereby release the school district and the reference source from any liability in connection with its release or use.

Date:       Signature: