

APPLICATION FOR EMPLOYMENT - CERTIFICATED POSITION

SCOTT CITY R-I SCHOOL DISTRICT

3000 Main Street
Scott City, MO 63780

Phone: 573.264.2381
Fax: 573.264.2206

The Scott City R-I School District considers applicants for all positions without regard to race, color, religion, sex, national origin or disability. If you have a disability or handicap which may require accommodation for you to participate in our application process (including filling out this form, interviewing or any other pre-employment procedure or requirement), please make us aware of any accommodation you feel is necessary. If you have any inquiries, complaints or concerns about any pre-employment procedure or requirement, including completing this application, or about the District policy of non-discrimination, you may contact the Superintendent in central office.

All applicants are expected to answer all questions on this application. Answer "none" or "not applicable" where necessary.

Name:

Date:

Other names that may appear on your transcripts or records:

Social Security Number:

Current Address (Street, City, State, Zip):

Current Phone:

Permanent Phone:

Permanent Address (Street, City, State, Zip):

Position(s) for which you are applying:

Date Available to Begin Work:

Certification Status:

Type (Life, PC1, Career, Etc.):

State(s):

Subject(s):

Grade Level(s):

Expiration date(s):

Other information regarding your Certification and/or certification status:

Subject(s):

Grade Level(s):

Teaching Experience (If none, list student teaching experience):

DISTRICT NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	SUPERVISOR	PHONE

Other Work Experience:

EMPLOYER NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	SUPERVISOR	PHONE

References:

NAME	ADDRESS	PHONE	POSITION

Employment Questions:

1. Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)?
Yes No
2. Have you ever pleaded guilty or no contest to a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)?
Yes No
3. Has the Missouri Division of Family Services or a similar agency in any other state or jurisdiction, ever issued a determination or finding of cause or reason to believe or suspect that you have engaged in physical, emotional, psychological or sexual abuse or neglect of a child?
Yes No
4. Have you ever failed to be re-employed by an educational institution?
Yes No

If the answer to any of the foregoing questions is "yes" please explain; use a separate sheet if necessary:

READ CAREFULLY BEFORE SIGNING

I acknowledge and agree to the following provisions as conditions to consideration of my application for employment:

1. I hereby authorize my current and former employers and references to furnish any information about me and about my work experience. I release my current and former employers and references from any and all liabilities or damages of any nature as a result of providing such information. My current and former employers and references may rely on a signed copy of this release.
2. I understand and consent to having criminal and arrest records checks as well as background checks by the Missouri Division of Family Services as a condition for consideration of my application for employment.
3. I certify that the answers given in this application are true and complete to the very best of my knowledge. In the event I am employed by the District and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understand that my employment may be terminated at any time after discovery of the false or misleading information.
4. I understand that this application will be considered active for six months from date of application. I understand that if I wish my candidacy to remain open after that date I must submit another application.

Signature

Date

Do Not Write Below This Line - For Administrative Use Only

Date received: Application _____ Credentials _____ Transcripts _____

Date interviewed: _____ Interviewed by: _____

Reference contacted: Name, date _____

Date: Applicant notified _____ Date: Applicant accepted _____

Position offered: _____ Salary step and level: _____

APPLICANT QUESTIONS

Name:

Social Security #:

Please respond to the following questions.

1. Why have you chosen teaching as your profession?

2. What student outcomes would you strive for as a teacher?

(continued on next page)

3. Write a brief autobiography focusing on the important people and events in your life.