

Holcomb Reorganized School District R-III
TEACHER'S APPLICATION FOR EMPLOYMENT

The 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 Mr. Ashley McMillian, Superintendent at 573-792-3113 ext. 1

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

A. GENERAL INFORMATION:

DATE _____

NAME _____ SOC. SEC. # _____
Last First Middle

ADDRESS _____
Street City State Zip Telephone Number

IF RELATED TO ANYONE IN OUR EMPLOY, STATE NAME & DEPT. _____

B. CERTIFICATION: Type _____ (Life, PCI, Etc.) Other _____
State(s) _____ Subject(s) _____
Grade Level(s) _____ Expiration date(s) _____
Other information regarding your Certification and/or certification status: _____

C. EMPLOYMENT REQUEST Position(s) for which you are applying: _____
Subject(s) _____ Grade Level(s) _____
Are you available for substitute teaching? _____ Paraprofessional? _____
Extra duty positions you may be interested in sponsoring or coaching: _____

D. EDUCATIONAL PREPARATION

| Name & Location | Dates of Attendance | Name of Degree | Major | Overall GPA |
|--------------------------|---------------------|----------------|-------|-------------|
| High School | N/A | N/A | N/A | N/A |
| College/ Universities | | | | |

E. TEACHING EXPERIENCE

| District Name & Location | Position | Dates of Employment | Number of Years | Supervisor | Phone |
|--------------------------|----------|---------------------|-----------------|------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |

F. OTHER WORK EXPERIENCE

Employer Name & Location _____ Position _____ Dates of Employment _____ Number of Years _____ Supervisor _____ Phone _____

G. REFERENCES

Name _____ Address _____ Phone _____ Position _____

H. 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) _____
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) _____
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? _____
4. Have you ever failed to be re-employed by an educational institution? _____

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

Return completed application to:
Holcomb Reorganized School District R-III
Office of Superintendent
P. O. Box 190
Holcomb, MO 63852

Do Not Write Below This Line - For Administrative Use Only.

Date received: Application _____ Credentials _____ Transcripts _____

Date interviewed: _____ Interviewed by: _____

Date and time: Applicant notified _____

Date and time: Applicant accepted _____

Position offered: _____

Salary, step and level: _____

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 through April 30th. I understand that if I wish my candidacy to remain open after that date I must submit another application.

Signature

Date