

Holcomb R-III School District
 102 South Cherry Street
 Holcomb, Mo. 63852
 (573) 792-3113; Fax (573) 792-3118

APPLICATION FOR AN ADMINISTRATIVE POSITION

The School District considers applicants for all positions without regard to race, color, religion, age, 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. Reasonable attempts will be made to accommodate special needs. 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 Dr. Ashley McMillian at 573-792-3113, Ext.1.

Last Name First Name Middle Name

Other names that may appear on your transcripts or records:

Social Security Number _____

Current Address _____
Street City State Zip

Current Phone (____) _____

Permanent Address _____
Street City State Zip

Permanent Phone (____) _____

Date Available _____

Certification: Type _____ (Life, CPC, etc.) Other _____

State(s) _____ Subject(s) area(s) _____

Grade Level(s) _____ Expiration date(s) _____

Other information regarding your certification and/or certification status: _____

Position(s) for which you are applying: _____

Educational Preparation:

Name & Location _____ Dates of Attendance _____

Degree(s) _____

Major _____ Overall GPA _____

College/University _____

Name & Location _____ Dates of Attendance _____

Degree(s) _____

Major _____ Overall GPA _____

College/University _____

Name & Location _____ Dates of Attendance _____

Degree(s) _____

Major _____ Overall GPA _____

College/University _____

Teaching Experience:

District Name and Address _____

Position(s) _____

Dates of Employment _____ Number of Years _____

Supervisor(s) _____

Phone (____) _____

District Name and Address _____

Position(s) _____

Dates of Employment _____ Number of Years _____

Supervisor(s) _____

Phone (____) _____

District Name and Address _____

Position(s) _____

Dates of Employment _____ Number of Years _____

Supervisor(s) _____

Phone (____) _____

Administrative Experience:

District Name and Address _____

Position(s) _____

Date of Employment _____ Number or Years _____

Supervisor(s) _____

Phone (____) _____

District Name and Address _____

Position(s) _____

Date of Employment _____ Number or Years _____

Supervisor(s) _____

Phone (____) _____

District Name and Address _____

Position(s) _____

Date of Employment _____ Number or Years _____

Supervisor(s) _____

Phone (____) _____

References:

Name	Address	Phone	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Employment Questions: Answer Yes or No

1. Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Excluding 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? (Excluding 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; the circumstances of each incident specifically, 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. Furthermore, I hereby release Central R-III Schools, and all its employees, from any and all liability of every nature and kind arising out of the investigation of information provided in this application.
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 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

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: _____