**CERTIFIED APPLICATION**

**Unified School District No. 403**

**P.O. Box 227**

**Otis, KS 67565**

**(An Equal Opportunity Employer)**

**A. PERSONAL DATA:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Date** |  |
| **Social Security Number** |  |  |  |

**PERMANENT ADDRESS TEMPORARY ADDRESS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Street** |  |  |  | **Street** |  |  |  |
| **City** |  |  |  | **City** |  |  |  |
| **State** |  | **Zip** |  | **State** |  | **Zip** |  |
| **Telephone** |  |  |  |  |  |  |  |

**B. POSITION DESIRED**

|  |  |
| --- | --- |
| **Elementary** |  |
| **Administration** |  |
| **Subject or Grade Level** |  |
| **Administrative Level** |  |

**C. ACADEMIC AND PROFESSIONAL INFORMATION:**

|  |  |
| --- | --- |
| **Do you hold a Kansas Teaching License?** |  |
| **Subjects and Levels of Kansas License** |  |
| **Date License Expires** |  |
| **Are you under contract?** |  |
| **……………..If so, where?** |  |

**Education and Professional Training:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Name** | **Units/Hours** | **Degree** | **Dates** | **Time Spent** |
| **High School** |  |  |  |  |  |
| **College or** |  |  |  |  |  |
| **University** |  |  |  |  |  |
|  |  |  |  |  |  |
| **Graduate** |  |  |  |  |  |

**What experiences or training have you had that would enhance your qualifications for this position?**

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| --- |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Major(s) in undergraduate work** |  | **Semester Hrs.** |  |
|  |  | **Semester Hrs.** |  |
| **Minor(s) in undergraduate work** |  | **Semester Hrs.** |  |
|  |  | **Semester Hrs.** |  |
| **Major(s) in graduate work** |  | **Semester Hrs.** |  |
|  |  | **Semester Hrs.** |  |
| **Minor(s) in graduate work** |  | **Semester Hrs.** |  |

**Are tapes or films available showing teaching skills or student performance?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Teaching Skills** | **Yes:** |  | **No:** |  |
| **Student Performance** | **Yes:** |  | **No:** |  |

**D. COLLEGE OR UNIVERSITY WHERE YOUR CONFIDENTIAL PAPERS ARE ON FILE:**

|  |  |
| --- | --- |
|  |  |
| **Name of Institution** | **Address** |
|  |  |
| **City** | **State, Zip** |

**E. STUDENT TEACHING EXPERIENCE (for beginning teachers)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of School** | **Address** | **Area – Grade/Subject** | **Date** | **Cooperating Teacher** |
|  |  |  |  |  |

**F. RECORD OF EDUCATIONAL POSITIONS. BEGIN WITH MOST RECENT EMPLOYMENT.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of School** | **USD No.** | **City, State, Zip** | **Dates**  **From To** | **Mos.** | **Salary** | **Position** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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**G. EXTRA CURRICULAR ACTIVITIES**

|  |  |  |
| --- | --- | --- |
|  | **Name of Activity** | **Years of Participation** |
| **High School** |  |  |
|  |  |  |
| **College** |  |  |
|  |  |  |

**List extracurricular or student activities you are able and willing to direct:**

|  |
| --- |
|  |

**REFERENCES: List below at three references including administrative and supervisory personnel who have first-hand knowledge of your performance and/or future potential in the area for which you are applying.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Official Position** | **Address** | **Phone No.** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**REQUIREMENTS FOR EMPLOYMENT:**

**If you are offered a contract, you must have an official transcript, Kansas Teaching License, current health certificate, Kansas Loyalty Oath, information required for Kansas Public Employees Retirement System and other employment records on file in the Central Office BEFORE you will receive payment under the contract.**

**I have completed this application to the best of my knowledge and do swear that all information stated here is accurate.**

**I, the undersigned, hereby give my permission to personnel of United School District No. 403, Otis-Bison, to make job related inquiries of employers and references listed in this application.**

|  |  |
| --- | --- |
| **Date** |  |
| **Signature of Applicant** |  |

|  |
| --- |
| **Additional Statements by Applicant:** |
|  |

**Note: This application is valid for one year from date of application.**

**Revised December 13, 2018**