**UNIFIED SCHOOL DISTRICT #351**

**MACKSVILLE, KANSAS**

**Certified Staff Application**





Date of Application\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position Applied for\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**PERSONAL INFORMATION**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last  First  Middle Social Security Number

Name on Transcripts & Placement Papers\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street &/or Box No., City, State, Zip Code

Present Residence Phone Number: Area Code-Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Permanent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street &/or Box No., City, State, Zip Code

Permanent Residence Phone Number: Area Code-Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Condition of Health: Do you have any condition that may limit your ability to perform the position appliedfor? Yes (\_\_) No (\_\_)

Have you ever been convicted of a felony? Yes (\_\_) No (\_\_)

Do you feel qualified to help in any extra curricular activities? (Specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFESSIONAL PREPARATION**

Do you hold a State of Kansas Teaching Certificate? Yes (\_\_) No (\_\_)

If No, what type? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What endorsement(s)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of college graduation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date available \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School Graduated From and Year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EDUCATIONAL BACKGROUND IN CHRONOLOGICAL ORDER**

|  |  |  |  |
| --- | --- | --- | --- |
| College/University Attended | Dates | Hours | Major(s) |
| (Names and Locations) | Inclusive | or Degree | & Minor |
|  |  |  |  |
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**TEACHING EXPERIENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| Name and Location of School | Dates | No. of | Grade Level |
| (Chronological Order) | Inclusive | Years | Subject(s) |
|  |  |  |  |
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**WORK EXPERIENCE OTHER THAN TEACHING:** *(Including Military Service)*

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| --- | --- | --- | --- |
| Name and Location of School | Dates | Job Title | Assignment |
| (Chronological Order) | Inclusive |  | Duties |
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Please write a paragraph stating interests, awards, honors achieved in high school, college or work. Please express your goals and ambitions. Include anything that will help us know you better.

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| An application is considered active when the Central Office is U.S.D. 351 has received (1) this employment application (completed and signed), (2) application letter from applicant, (3) resume from applicant, (4) placement office credentials with reference letters, and (5) all official transcripts.  A medical examination (at the applicant’s expense) and a valid State of Kansas Teaching Certificate will be required when and if employed.  An on-site interview(s) at the applicant’s expense is required before hiring, unless specifically waived by the District. |

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the information given by me on this application and any supplement is true and correct to the best of my knowledge. I understand that false statements on this application may result in termination of employment.

Date of Signing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_