APPLICATION

Clarksburg C-II School District

401 S. Hwy. H
Clarksburg, MO 65025
Phone 573-787-3511
Fax 573-787-3667

Thank you for your interest in the Clarksburg C-II School District. In order for us to process your application, it must be complete and all areas must be signed by the applicant.

A COMPLETE APPLICATION INCLUDES:

- LETTER OF INQUIRY
- RESUME
- OFFICIAL APPLICATION
  (Print and fill-in or complete and submit the .doc file.)
- PLACEMENT FILE
- REFERENCES

APPLICATION

CLARKSBURG C-II SCHOOL DISTRICT

401 S. Hwy. H
Clarksburg, MO 65025
Phone 573-787-3511
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APPLICATION FOR A CERTIFICATED POSITION

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 Wendy Brock, Superintendent, at 573-787-3511.

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

Date _____

_____ _____ _____
Last Name First Name Middle Name

Other names that may appear on your transcripts or records:

_____

Social Security Number _____-____-_____

Current Address _____
Street, City, State, and Zip

Current Phone _____

Permanent Address _____
Street, City, State, and Zip

Permanent Phone _____

Date Available _____

APPLICATION

Certification: Type _____ (Life, PC1, Etc.) Other _____

State(s) _____ Subject(s) _____

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

Other information regarding your Certification and/or certification status:

_____

Position(s) for which you are applying: _____

Subject(s) _____

Grade Level(s) _____

Are you available for substitute teaching? Yes ☐ No ☐ Paraprofessional? Yes☐ No☐

Extra duty positions you may be interested in sponsoring or coaching:

_____

Educational Preparation:

	NAME & LOCATION	DATES OF ATTENDANCE	NAME OF DEGREE	MAJOR	OVERALL GPA
HIGH SCHOOL		N/A	N/A	N/A	N/A
COLLEGES/ UNIVERSITIES					

APPLICATION

Teaching Experience (If none, list student teaching experience. If more space is required, please use another page. Please list **all** teaching experience.) :

DISTRICT NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	NUMBER OF YEARS	SUPERVISOR	PHONE

Other Work Experience:

EMPLOYER NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	NUMBER OF YEARS	SUPERVISOR	PHONE

References:

NAME	ADDRESS	PHONE	POSITION

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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:

APPLICATION

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 May 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: _____

APPLICATION

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?

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