

LA PLATA R-II SCHOOL DISTRICT

201 W. Moore Street

La Plata, MO 63549

Phone: 660-332-7001

Application For A Certificated Position

The La Plata R-II 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 La Plata R-II School District policy of non-discrimination, you may contact Dr. Craig Noah, Superintendent, at 660-332-7001.

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

Date of Application: _____

PERSONAL BACKGROUND INFORMATION

Last Name

First Name

Middle Name

Social Security Number: _____ - _____ - _____

Current Address: _____

Street

City

State

Zip

Permanent Address: _____

Street

City

State

Zip

Current Phone: (_____) _____ - _____

Permanent Phone: (_____) _____ - _____

Email Address (Optional): _____

Date Available: _____

Position(s) for which you are applying: _____

CERTIFICATION

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

State(s) _____ Subject(s) _____

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

Other information regarding your Certification and/or certification status:

Other job-related skills for which you would be willing to be responsible for:

EDUCATIONAL PREPARATION

	Name & Location	Dates of Attendance	Name of Degree	Major	Overall GPA
High School					
Colleges/Universities					

TEACHING EXPERIENCE (If none, list student 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

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:

APPLICANT QUESTIONS

Name: _____

Please respond to the following questions in your own handwriting.

1. Why have you chosen teaching as your profession?
2. What student outcomes would you strive for as an teacher?
3. Write a brief autobiography focusing on the important people and events in your life.

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 La Plata R-II School 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 contact the school district and make the appropriate arrangements.

Signature

Date

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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: _____

1.