

Position Desired _____ Date _____

Sturgeon R-V School District
210 West Patton Street
Sturgeon, MO 65284
Phone: 573-687-3515 Fax: 573-687-2116

Sturgeon R-V Is An Equal Opportunity Employer

Application For A Certified 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 the Superintendent's office at 573-687-3515.

All applicants are expected to answer all questions on this application. Answer "none" or "non applicable" where necessary.

(Last Name) (First Name) (Middle Name)

(Street) (City) (State) (Zip Code) (A/C Telephone)

Other names that may appear on your transcripts or records:

Social Security Number _____ - _____ - _____

Date Available _____

Name and address of person who will always know your address. (Do not list spouse)

(Last Name) (First Name) (Middle Name)

(Street) (City) (State) (Zip Code) (A/C Telephone)

Professional Organizations:

Other memberships: _____

Leisure-time activities: _____

Sturgeon R-V School District

Certification: Type _____ (Life, PCI, 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? _____ Paraprofessional? _____

Extra positions you may be interested in sponsoring or coaching _____

Educational Preparation:

High School, Undergraduate and Graduate Education:

Name of High School, College And/or University	Location	Dates Inclusive	Major	Degree	Sem Hrs
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The applicant must file with the Superintendent's Office a copy of the transcript of college and university credit earned and a copy of placement file papers.

Undergraduate G.P.A.: _____ Special Recognition: _____

High School and College activities in which you participated:

Sturgeon R-V School District

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

In your own handwriting state the reasons you are interested in this school district and further information which you believe may strengthen your application (i.e. additional areas of certification):

Sturgeon R-V School District

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:

Sturgeon R-V School District

CONSENT FORM

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 check 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 for one year. I understand if I wish my candidacy to remain open after that date I must submit another application.

Social Security Number _____ - _____ - _____ Birthdate _____ - _____ - _____



Do No 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: _____