

Central Heights Schools Unified School District 288

3521 Ellis Road
Richmond, KS 66080
Phone: 785-869-3455
Fax: 785-869-2675

For Office Use Only	
	DATE
Application Received	___/___/___
Interview on Campus	___/___/___
Interview Scheduled	___/___/___
By: _____ (Signature)	

CERTIFIED PERSONNEL APPLICATION

Please furnish all information requested on this application;
do not refer to other sources.

Date of filing application: ___/___/___ Date When Available: ___/___/___

Name (Last, First, Middle): _____

Present Address: Street: _____

City/State/Zip: _____

County: _____ E-Mail Address: _____

Telephone Number: _____ Cell Number: _____

Permanent Address: _____

Street: _____

City/State/Zip: _____

Position Desired

1 st Choice	2 nd Choice	3 rd Choice

An Equal Opportunity Employer

Applicants are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or disability. Specific complaints of alleged discrimination should be referred to the USD 288 Superintendent's Office, 3521 Ellis Road, Richmond, KS, 66080, 785-869-3455.

PERSONAL DATA

Present Position: _____ How Long? _____

Present Yearly Salary _____ for _____ Months, Salary required. _____

KANSAS CERTIFICATION INFORMATION

Do you hold a valid Kansas Teaching Certificate? Yes NO If yes, provide the following information.

Certification Area	Grade Levels	Expiration Date

EDUCATIONAL AND PROFESSIONAL TRAINING

	Name of College or Institution	Degree	Graduate Hours	Date Received		Date of Attendance	
				Mo.	Year	Year	Year
College / Univ.				/		-	
College / Univ.				/		-	
College / Univ.				/		-	
College / Univ.				/		-	
College / Univ.				/		-	
College Major:				No. of hours in major:			
College Minor:				No of hours in minor:			

STUDENT TEACHING

Name of District School, City and State	Grades or Subjects Taught	Inclusive Dates Year - Year
		-
		-

PROFESSIONAL EXPERIENCE

Starting with the most recent year, list years of teaching or administrative experience, including partial years. DO NOT list paraprofessional positions, substitute teaching, or graduate teaching assistantships,

Years	School, Complete Address	Assignment (Subject Grade Level, Admin, Etc.)
-		
-		
-		
-		

EXPERIENCE OTHER THAN TEACHING OR ADMINISTRATION * (*Note, please account for all time.)

Inclusive Dates Year - Year	Name of Firm and Location	Type of Work

NAME, ADDRESS, WORK AND HOME TELEPHONE NUMBERS OF PRESENT PRINCIPAL OR IMMEDIATE SUPERVISOR

	Work () -	Home () -

REFERENCES

List only those QUALIFIED* to pass judgment on your qualifications for the positions you seek. *Persons who have knowledge of your classroom work as a teacher or as a student in college are considered qualified references. (i.e. cooperating teacher, college supervisor, principal, department chairman, supervisor, others.) Please list references even though they are included in credentials.

Name & Title	Address - Include Zip Code	Home & Work Telephone Numbers + Area Codes	Dates Acquainted With Your Work
		Work () -	/
		Home () -	
		Work () -	/
		Home () -	
		Work () -	/
		Home () -	
		Work () -	/
		Home () -	
		Work () -	/
		Home () -	

Other than minor traffic offense for speeding, parking violations, etc., have you ever been convicted of any criminal offense?
 Yes No If yes, please explain _____

Conviction of a crime in not an automatic bar to employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.
 Why do you desire to leave your present position, or why did you leave your last position? (Questions do not apply to those graduating this year.) _____

Have you ever been involuntarily terminated from employment!? Yes No
 If yes, please give the name of the employer, the date an the reason for the termination. _____
 Are you aware of any reason you would not be able to perform the duties of the position for which you are making an application?
 Yes No If yes, please explain. _____

What student activities are you able and willing to sponsor (e.g. coaching, clubs)
 1. _____ 3. _____
 2. _____ 4. _____

What collegiate honors and awards have you received? _____
 In what collegiate activities have you participated? _____

Add by letter or resume any additional information that will give us a more complete estimate of your educational training and experiences. Emphasize your special preparation and training along with your experience with extra-curricular activities.

AGREEMENT

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3. I authorize you to request, receive and verify all information given on this application and I release you from all damages that may result from your doing so.
4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation and I release you from all liability for any damages that may result from your doing so. I understand that if I am offered provisional employment in the school district that my fingerprints may be taken and a request made for a state and national criminal background check. I further understand that if the results of this criminal history check reveal that I have been convicted of any offense or any attempt to commit any offense specified in K.S.A. 1999 Supp. 72-1397 and amendments thereto that my employment may be terminated.
5. I understand that this application and records become the property of the District, which reserves the right to accept or reject it. I further agree to observe all rules, regulations, and policies of the District

Signature of Applicant

