

SEDGWICK PUBLIC SCHOOL USD 439
 PO BOX K, 400 W. 4th St.
 SEDGWICK, KS 67135

Certified Application

Date of Application: _____

Please indicate the position(s) desired (1) _____ (2) _____

Name: _____

Address: _____ Evening Phone: _____

City/State/Zip: _____ Daytime Phone: _____

Professional Data

Current Employment _____

Are you now under contract? _____

If so, when does your contractual obligation expire? _____

Are you certified to teach? _____ If so, please answer the following:

A. Which state issued certificate? _____

B. Date Issued _____ Expiration date _____

C. Grade level and subjects for which you are certified (from certificate):

D. Certificate number _____

List professional memberships that may relate to the job for which you are applying:

Chronological Teaching Record

Month/Year	School District/Location	Teaching Duties	Annual Salary	Reason for Leaving

Total Years Experience (including this year) _____

List the names and addresses of your past immediate supervisors (in chronological order): include Student Teaching Supervisor(s)

Supervisor's Name: _____

Address: _____

Position: _____ Phone #: _____

Supervisor's Name: _____

Address: _____

Position: _____ Phone #: _____

Supervisor's Name: _____

Address: _____

Position: _____ Phone #: _____

Supervisor's Name: _____

Address: _____

Position: _____ Phone #: _____

Other Work Experience

Employer / Location

Duties

Dates

Personal References

Please list the name, address and telephone number of several people who know you and your abilities sufficiently well to service as a reference.

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Is it permissible to contact any or all of the above references? _____

If no, after what date will contact be permissible? _____

Educational Background

Name/Location of High School: _____

Year Graduated: _____

College/University: _____ Dates Attended: _____

Degree &/or Hours: _____ Major: _____

College/University: _____ Dates Attended: _____

Degree &/or Hours: _____ Major: _____

College/University: _____ Dates Attended: _____

Degree &/or Hours: _____ Major: _____

Number of semester hours in major field: Undergraduate _____ Graduate _____

Number of semester hours in minor field: Undergraduate _____ Graduate _____

College honors and activities: _____

What activities can you sponsor or coach? _____

I agree to the following:

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 understand and agree that the board has the option of doing a criminal history records check. I further understand and agree that the board can terminate my employment if the results of the criminal history records check reveal I have been convicted of any offenses specified in law. I hereby authorize the school district to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation and I release the board, the school district, and its employees or agents from all liability for any damages that may result from the criminal history records check.
5. I agree to observe all rules, regulations and policies of the district now in force and effect or as they may change during my employment if I am hired by the district.

Signature of Applicant

Date

Rev.2/16