

Administrative Application

Date:

Name:

Present Address:

City, State:

Zip Code:

Home Phone: **Cell Phone:**

E-mail:

Social Security #

Permanent Address:

City, State:

Zip Code:

Present Position:

Position Applied for:

Imagine, Inspire, Innovate...Road to Greyhound Greatness

"Office of the Superintendent"

210 North Street
 Windsor, MO 65360
 Phone: 660-647-3533
 Fax: 660-647-2711
 schultzs@henrycountyr1.k12.mo.us
 www.henrycountyr1.k12.mo.us

The Henry County R-1 Board of Education and its employees are committed to maintaining a workplace and educational environment that is free from illegal discrimination or harassment in admission, access, treatment, or employment in its programs, activities and facilities. Discrimination or harassment against employees, students or others on the basis of race, color, religion, sex, national origin, ancestry, disability, age or any other characteristic is strictly prohibited in accordance with law. The Henry County R-1 School District is an equal opportunity employer. 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 Superintendent of Schools.

This application is considered completed after receipt of the following:

1. Letter of application;
2. completed application;
3. Current resume;
4. College transcripts;
5. Copy of Missouri Administrator Certificate; and
6. Three letters of professional reference

Do you hold a MO teaching Certificate? Yes No

Name as it appears on certificate:

Certification Subject	Grade Level	Type of Certificate	Effective Date	Expiration Date

Educational and Professional Training

	Name of School	Degree or Diploma	Date degree received	Dates of Attendance	GPA
High School					
College or University					
College or University					
College or University					
College or University					

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Education Employment

1. (list most recent experience here)

Name and address of school:

Subject/Grade taught:

Dates of employment:

From:

To:

No. of Years:

Supervisor

Phone

Reason for Leaving (be specific):

2.

Name and address of school:

Subject/Grade taught:

Dates of employment:

From:

To:

No. of Years:

Supervisor

Phone

Reason for Leaving (be specific):

3.

Name and address of school:

Subject/Grade taught:

Dates of employment:

From:

To:

No. of Years:

Supervisor

Phone

Reason for Leaving (be specific):

4.

Name and address of school:

Subject/Grade taught:

Dates of employment:

From:

To:

No. of Years:

Supervisor

Phone

Reason for Leaving (be specific):

5.

Name and address of school:

Subject/Grade taught:

Dates of employment:

From: To: No. of Years:

Supervisor Phone

Reason for Leaving (be specific):

Please list 3 references other than relatives not listed in your credentials

Name	Official Position	Complete Address	Phone

Employment Questions

1. Have you ever been arrested for, charged with, pleaded guilty to, convicted of or given a diversion from any misdemeanor or felony, excluding non-alcohol/drug related traffic offenses for which the fine was less than \$250?
 No Yes
2. 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 or sexual abuse/neglect of a child?
 No Yes
3. Has your employment with any educational institution or agency ever been terminated prior to the fulfillment of your contractual term of employment?
 No Yes
4. (Answer only if military veteran.)
Did you receive a discharge other than honorable from military service?
 No Yes

If your response to any question above was YES, you may provide a confidential explanation in a sealed envelope as part of your application materials.

Please share your vision for leading district student services and advocating for excellence and equity for every student. .

Release of Information

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 until the position for which I have applied is filled by action of the Board of Education. I understand that if I wish my candidacy to remain open after that date I must submit another application.

By checking the I AGREE box , the applicant acknowledges that she/he is indeed the person named in this application, has read the above conditions of this application and testifies that this application and supporting materials are true and accurate to the best of her/his knowledge. I AGREE

Special Directions: Download as pdf file and complete on paper or select print and save as pdf to your file *before you close this application to save your work.*

Send by email to Dr. Kristee Lorenz at lorenzk@henrycountyr1.k12.mo.us or bring into the superintendent's office.

Signature

Print Name