

HOME OF THE DRAGONS



COOPER COUNTY R-IV
CERTIFICATED EMPLOYMENT APPLICATION

Name _____ Date _____
(Last) (First) (Middle)

Present Address _____ Phone (____) _____
(Street) (City) (State) (Zip)

Permanent Address _____ Phone (____) _____
(Street) (City) (State) (Zip)

Type of Position Desired (Be Specific) _____

Date available start _____ Salary Expected _____ Present Salary _____

SCHOOLS ATTENDED (List Most Recent First)

Name/Location Of Education School	Number of Years	Major Area	Graduate	Date	Degree

Number of hours in Major Field Undergraduate _____ Graduate _____

Grade Point Average in Major Field Undergraduate _____ Graduate _____

Grade Point Average for all Work Undergraduate _____ Graduate _____

Practice Teaching: Date _____ Number of Credit Hours _____

School address where practice teaching was done _____

Practice teaching was done at what grade level and in what subject matter areas _____

Name and address of supervising teacher (Master Teacher) _____

List any college activities of honors _____

Certificate in force _____
(City) (County) (State) (When issued) (Expires)

EMPLOYMENT HISTORY (attach additional sheet if necessary)

Company Name	Telephone ()
Address	Employed (State Month and Year)
Name of Supervisor	Monthly Pay Start End
State Job Title and Describe your Work	Reason for Leaving
Company Name	Telephone ()
Address	Employed (State Month and Year)
Name of Supervisor	Monthly Pay Start End
State Job Title and Describe your Work	Reason for Leaving
Company Name	Telephone ()
Address	Employed (State Month and Year)
Name of Supervisor	Monthly Pay Start End
State Job Title and Describe your Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact. Do not contact: _____

REFERENCES (list three people other than past employers or relatives)

Name	Address	Phone where they can be reached between 8:00a.m.-5:00p.m.

Do you know or are you related to anybody working for the District

In what activities are you most interested and could sponsor _____

State here anything you might think applicable but overlooked elsewhere in this application _____

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 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.

Signature of Applicant _____ Date _____

Do Not Write Below This Line – For Administration 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: _____

Return Application to:
Cooper County R-IV School District
Attention To: O tuLLgulec'J wj , Rtlpekr en
500 E. Main
Bunceton, MO 65237

A School with Academic Distinction