



Willow Springs R-IV Schools
215 West Fourth Street
Willow Springs, MO 65793
417-469-3260

Application for CERTIFICATED EMPLOYMENT
 (Please print or type)

PERSONAL:		
Last Name	First Name	Middle Name
Social Security Number	Application Date	
Present Address:		
Street	() Phone	
City	State	Zip
Person who will always be able to contact you. (Do not list spouse.)		
Name	Phone Number ()	

CERTIFICATION:						
List below current Missouri certificates held. If you are currently a student, indicate below the certification you will receive upon graduation. Include photocopy or letter of eligibility. Please indicate expiration date of certificate(s) (if applicable).						
Area or Subject	Grade Level(s) Covered	Type of Certificate				
		Life	PC I or PC II	CPC	IPC	CCPC
		Vocational				

EDUCATIONAL PREPARATION:

Name and Location of School or Institution	Degree Received	Major	Hours in Major
--	-----------------	-------	----------------

HIGH SCHOOL			
Name			
City			

UNDERGRADUATE STUDIES			
College			
State			
College			
State			
College			
State			

GRADUATE STUDIES			
College			
State			
College			
State			

NON-TEACHING WORK EXPERIENCE
(List most recent experience first)

Employer	Location	Nature of Work	Dates

POSITION DESIRED
(Check all that apply)

<input type="checkbox"/> ELEMENTARY (number in order of preferences) ___ Pre-School ___ Kindergarten ___ Primary (K-3) ___ Intermediate (4) ___ Support Area (music, art, Physical Education, etc.)	<input type="checkbox"/> MIDDLE SCHOOL (5-8) List subjects in order of preference 1. _____ 2. _____ 3. _____
<input type="checkbox"/> OTHER POSITIONS (counselor, librarian, speech therapist, administrator, etc.) _____ _____ _____	<input type="checkbox"/> HIGH SCHOOL List subjects in order of preference 1. _____ 2. _____ 3. _____
<input type="checkbox"/> SPECIAL EDUCATION/COMPREHENSIVE EDUCATION ___ Learning Disabilities ___ Mentally Retarded ___ Behavioral Disorders ___ Gifted ___ Other _____	

CONTRACTUAL TEACHING/ADMINISTRATIVE EXPERIENCE

(List most recent experience first and whether position was full time (FT) or part-time (PT) equivalency.)

Name & Type Of school (Elem., Middle, High, etc.)	Complete Address (Street, City, State, Zip)	Grade(s) or Subject(s) Taught	No. Years		Dates		Reason for Leaving
			FT	PT	From	To	

Total Number of Years Teaching Experience in a public School System _____
Total Number of Years Teaching Experience in a Missouri Public School System _____

Date Available for Position _____ Current Contract Expiration _____

Are you presently legally authorized to work in the United States on a full-time basis? _____

1. Have you ever had a teaching certificate or license revoke or suspended? _____
2. Have you ever surrendered a teaching certificate or license before its expiration? _____
3. Have you ever resigned a position as part of an agreement to avoid teaching certificate or license revocation? _____
4. Have you ever been released or terminated or have you ever resigned from school-related employment because of misconduct or unsatisfactory service? _____
5. Have you ever resigned a school-related position as part of an agreement to avoid dismissal? _____

If you answered YES to any of questions 1-5 above, please explain with an attached statement.

ACTIVITIES AND HONORS

(Please indicate below those areas you feel qualified and willing to coach or sponsor)

	Academic Club Sponsor		Marching Band		Other Club Sponsor (Specify Below)
	Baseball		Special Olympics		
	Basketball		Speech/Debate		
	Cheerleader		Tennis		
	Class Sponsor		Track/Cross Country		
	Football		Volleyball		
	Golf		Yearbook		

PERSONAL STATEMENT

Please write a brief statement in your own handwriting, giving your reasons for entering the teaching profession, your long range goals, and other pertinent information describing your qualifications.

REFERENCES

Name	Years Known	Official Position	Address (Street, City, State, Zip)	Phone

PROFESSIONAL STATEMENTS

(In your own handwriting, please answer the following questions within the space provided.)

What are your three (3) most important reasons for wanting to be a teacher?

How much do you want to know about your students in order to be most helpful to them?

What three (3) things do you most want to know about your students?

What do you need to know in order to begin your lesson planning for class?

What four (4) key components do you believe you must indicate in your lesson plan?

When you think about your students, in what major ways do you most want to influence their lives?

What two (2) core teaching strategies do you most use to achieve this result?

CRIMINAL RECORD AND CHILD ABUSE/NEGLECT REPORT

Employment with the district is contingent upon the satisfactory completion of a criminal and child abuse/neglect record check. An unsatisfactory report shall constitute cause for rejection of an application or immediate termination, as may be appropriate. Although the existence of an arrest, charge or conviction* may not constitute an unsatisfactory report, the district has a compelling interest in the safety and welfare of its students. Therefore, the district is permitted by law, and has an obligation, to request criminal and child abuse/neglect information and official records for each applicant and employee, and to act in accordance with such information and official records. Applicants and employees must report any arrests, charges or convictions that occur subsequent to the time they initially complete the form. Questions regarding this information should be directed to the Superintendent. Please read carefully and answer every question.

Please print clearly.

Have you ever been arrested for, charged with, or convicted of a felony, misdemeanor, or ordinance violation? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)
Yes _____ No _____

Have you ever plead guilty or nolo contendere (no contest) to a felony, misdemeanor, or ordinance violation? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)
Yes _____ No _____

Have you ever received a suspended imposition or execution of sentence?
Yes _____ No _____

Are you currently on parole or probation?
Yes _____ No _____

Has the Missouri Department of Family Services, or a similar agency in any other state or jurisdiction, ever issues a determination or finding of cause or reason to believe or suspect that you had engaged in physical, emotional, psychological or sexual abuse or neglect of a child?
Yes _____ No _____

*CONVICTION means the final judgment on a verdict or a finding of guilty, a plea of guilty, or a plea of nolo contendere, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken.

If you answered YES to any of the above questions, please explain with an attached statement.

MISSION STATEMENT: *The mission of the Willow Springs R-IV School District is to improve the quality of life for everyone through quality education.*

BELIEF STATEMENTS:

A quality school system is a reflection of a community, parents, and students that value education.

Learning is a natural and continuous process that has no known limits.

An ideal learning environment is stimulating and challenging, where everyone is emotionally and physically safe, and treated with respect.

A quality system of education is built on the foundational attributes of self-discipline, responsibility and trustworthiness.

(Please write your response to the BELIEF STATEMENTS listed above.)

My signature below authorizes the school district to conduct an investigation of my personal or employment history and authorizes any former employer or person, firm, corporation, credit agency or government agency to release any information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, personal references, professional references, any findings of child abuse or neglect investigations and any other appropriate information involving me. This release includes any law enforcement agencies, criminal record agencies, previous employers, educational institutions, Missouri or other State Department of Social Services, Child Protective Services in any locality to which they may refer. In consideration of the school district's review of this application, I waive my right of access of any such information, and without limitation, hereby release for use.

Furthermore, I certify that the statements contained herein are true, correct and complete answers in the knowledge that they may be relied upon in considering my application, and I understand that my omission, falsely answered statement made by me on this application, or any supplement to it, will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

SIGNATURE OF APPLICANT

DATE

The Willow Springs R-IV School District does not discriminate on the basis of race, color, religion, national origin, sex, age, or disability in admission or access to, or treatment or employment in the programs and activities. The Willow Springs R-IV School District is an equal opportunity employer. If you have inquiries or complaints concerning the application or the Willow Springs R-IV School District's policy of nondiscrimination, you may contact the Superintendent at 417-469-3260.

FOR OFFICE USE ONLY

Application Date _____	Employment Date _____
<input type="checkbox"/> Contract	<input type="checkbox"/> Tenure Attainment Date _____
<input type="checkbox"/> I-9	<input type="checkbox"/> Records Check
<input type="checkbox"/> Missouri Teaching Certificate	<input type="checkbox"/> Health Insurance Application
<input type="checkbox"/> Placement Papers or Reference	<input type="checkbox"/> Official Transcript
	<input type="checkbox"/> W-4

Date Hired

Salary Step

Application will be kept on file one year from application date.