	EAST OTERO SCHOO 301 RATON	V AVE.	T R-1
	LA JUNTA, CO 81050 (719)384-6900 FAX (719)384-6910		
<u>APPLICATIO</u>	N FOR PROFESSIONAL ST TEACHING or ADMINISTRA		<u>MENT</u>
<u>PLEASE TYPE OR PRINT</u>	Date	*SS *This will be u	SN:
Notice to Applicant:			
unlawfully discriminate on the marital status, sexual orientation	Last Otero School District R-1, L e basis of race, color, sex, religion ion, genetic information, disabilit to, treatment, or employment in C).	n, national origin ty or need for spe	, ancestry, creed, age, ecial education
Name			/>
(Last Name)	(First Name)		(Middle Name)
Address(Street)	(City)	(State)	(Zip Code)
Email Address	(Optional)		
Home Phone Number	Message Phone Number		
TEAC	CHING/ADMINISTRATIVE POSITIO	N(S) DESIRED:	
Elementary			
Secondary			
	b description for this/these position ntial functions of this/these position		
Yes No			

ADDITIONAL AND PROFESSIONAL TRAINING					
Name of School	Location	Graduate	Dates	Degree or Education	
High School		YesNo			
Undergraduate		YesNo			
Graduate Work		YesNo			
Special Work					
<u>TEACHING/ADMINISTRATIVE EXPERIENCE</u> Please list the last three teaching/administrative positions you have held. List most recent job in the first space.					
1. School:		Supervisor:		Grades Taught:	
Address:			Phone:		
	Date Left:	Duties Assigned:			
2. School:		Supervisor:		Grades Taught:	
Address:			Phone:		
Date Started: I	Date Left:	Duties Assigned:			
3. School:		Supervisor:		Grades Taught:	
Address:			Phone:		
Date Started: I	Date Left:	Duties Assigned:			

WORK REFERENCES

List below persons who know your ability as a teacher/administrator and about your general qualifications. Qualification of applicants under consideration may be investigated by correspondence and or telephone. Three recent references are requested.

NAME	RELATIONSHIP TO APPLICANT	PHONE				
	& PLACE OF EMPLOYMENT	NUMBER				
1						
2						
*Please do not list family mem						
GENERAL INFORMATION						
Do you hold a Colorado '	Teaching/Administrative Certificate/License?	YesNo				
If yes, Certificate/License Number Expiration Date:						
Certificate/License Endo	rsements:					
	ract? Contract expiration:					
-	nissed or asked to resign from employment?					
,						
n yes, please explain						
Have you ever been conv	ricted of a felony? If yes please explain b	v confidential letter				
Have you ever been convicted of a felony?If yes, please explain by confidential letter.						
why do you wish to leav	re your present position?					
Why do you wish to teach/administrate in this district?						
Do you plan to continue	graduate work? If so, in what field?					
Where?						

In the event of a vacancy, East Otero School District R-1 will need a completed application on file, a copy of your resume, a copy of your teaching/administrative certificate, and a copy of your credentials sent to the district office.

Have you requested your credentials to be sent to the district office? Yes_____ No_____

Name of College or University:

AGREEMENT

I hereby certify that the above information is true, accurate, and complete, to the best of my knowledge. Any misrepresentation or omission of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, I understand that this application and records become the property of the District and the District reserves the right to accept or reject the application.

If I am employed by the District, 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.

In addition, I hereby authorize East Otero School District R-1 to conduct work history, personal reference, driver, police and/or other inquiries to determine my acceptability for employment.

Signature of Applicant