

# USD #108

Washington County Schools  
101 West College Street  
Washington, Kansas 66968

## APPLICATION FOR CERTIFIED EMPLOYMENT

POSITION: \_\_\_\_\_

DATE: \_\_\_\_\_

*For office use only.*

Date of complete  
application packet.  
\_\_\_\_\_

The USD 108 Board of Education shall hire all employees on the basis of ability and the district's needs. Washington County School District is an equal opportunity employer and shall not discriminate in its employment practices and policies with respect to hiring, compensation, terms, conditions, or privileges of employment because of an individual's race, color, religion, sex, age, disability or national origin.

Last Name

First Name

Middle Name

Maiden Name (optional)

### Present Address:

Street Address

City

State

Zip Code

### Permanent Address:

Street Address

City

State

Zip Code

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Preferred daytime contact number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Number of days missed last year due to family or personal illness: \_\_\_\_\_ (Explanation Optional)

Describe any conditions that would prohibit your performance of duties required in the position for which you are applying: \_\_\_\_\_

Do you hold a valid Kansas teaching certificate? Yes\_\_\_\_ No\_\_\_\_ Eligible\_\_\_\_ Expiration Date\_\_\_\_\_

Kansas Educator License Number: \_\_\_\_\_

Briefly state your reasons for wanting to be employed by our district.

Present Position: \_\_\_\_\_ Location: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Present Salary: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Supervisor's address: \_\_\_\_\_

May we contact your current employer as a reference? Yes\_\_\_\_ No\_\_\_\_

Professional References: (Include supervisor, principal and any other professional educator in a position to judge your teaching ability.

Name	Title	School District	School Name
Street Address	City	State	Zip Code
Home Phone: _____		Work Phone: _____	

Name	Title	School District	School Name
Street Address	City	State	Zip Code
Home Phone: _____		Work Phone: _____	

Name	Title	School District	School Name
Street Address	City	State	Zip Code
Home Phone: _____		Work Phone: _____	

Name	Title	School District	School Name
Street Address	City	State	Zip Code
Home Phone: _____		Work Phone: _____	

Name	Title	School District	School Name
Street Address	City	State	Zip Code
Home Phone: _____		Work Phone: _____	

I confirm that the information above is accurate and complete.

Signature of Applicant: \_\_\_\_\_

#### **ITEMS NEEDED TO COMPLETE YOUR APPLICATION:**

Letter of Interest	_____
Application Form	_____
Resume	_____
Letters of Reference (3 min.)	_____
Transcripts (copies are acceptable)	_____
Copy of Teaching Certificate	_____

(date received by USD 108)

A personal interview is required for employment.  
Interview appointments will be scheduled by USD 108.  
Expenses incurred will be borne by the applicant.

Return application materials to:

Elizabeth Romeiser  
USD 108  
101 West College Street  
Washington, KS 66968

Phone: 785.325.2261x3 Fax: 785.325.2138

[eromeiser@usd108.org](mailto:eromeiser@usd108.org) (emailing materials is acceptable)