

**PERSONNEL SERVICES**

**Form 4120.5**

**Employment**

**Applicant Notice - Administrative Position**

FAIR PLAY R-II DISTRICT  
301 N. WALNUT STREET  
FAIR PLAY, MO 65649  
(417) 654-2231, Fax (417) 654-5028

Dear Applicant:

Thank you for your interest in applying for an administrative position with the Best School District. We ask that the following items be addressed as a part of the application process:

1. Complete the enclosed application form.
2. Enclose a copy of your latest transcript(s) with the application. An official copy of your transcript(s) will be required if you are employed.
3. Enclose a copy of your Missouri teaching certificate or verification of eligibility for a Missouri teaching certificate.
4. Request your placement file be sent to us, or enclose 4 to 5 recent letters of recommendation. Also enclose a copy of your resume
5. Two copies of the form for child abuse and criminal record checks are enclosed. One copy must be completed and submitted to the Missouri State Highway patrol for the name search (#1, \$5.00 fee). The other copy must be completed and submitted to the Missouri Division of Family Services (#3, no charge). Each agency will then return the form to the Best School District.

Your application will become active once all of the above information has been received. Your application will remain active until April 30th at which time you must resubmit a new application. Please call the Superintendent Office at (417) 654-2231 if you have any questions about the application process.

Sincerely,

Dr. David Geurin  
Superintendent

Enclosures

EmploymentEmployment Application – Certificated Staff - Administration**APPLICATION FOR AN ADMINISTRATIVE POSITION**

The School District considers applicants for all positions without regard to race, color, religion, sex, national origin or disability. If you have a disability or handicap which may require accommodation for you to participate in our application process (including filling out this form, interviewing or any other pre-employment procedure or requirement), please make us aware of any accommodation you feel is necessary. 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 \_\_\_\_\_ at \_\_\_\_\_.

All applicants are expected to answer all questions on this application. Answer "none" or "not applicable" where necessary.

Date \_\_\_\_\_

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Last Name

First Name

Middle Name

Other names that may appear on your transcripts or records:

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Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current Address \_\_\_\_\_

Street

City

State

Zip

Current Phone(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Permanent Address \_\_\_\_\_

Street

City

State

Zip

Permanent Phone(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date Available \_\_\_\_\_

Certification: Type \_\_\_\_\_ (Life, PC1, Etc.) Other \_\_\_\_\_

State(s) \_\_\_\_\_ Subject(s) \_\_\_\_\_

Grade Level(s) \_\_\_\_\_ Expiration date(s) \_\_\_\_\_

Other information regarding your Certification and/or certification status: \_\_\_\_\_

\_\_\_\_\_

Position(s) for which you are applying: \_\_\_\_\_

Subject(s) \_\_\_\_\_

Grade Level(s) \_\_\_\_\_

Are you available for substitute teaching? \_\_\_\_\_ Paraprofessional? \_\_\_\_\_

Extra duty positions you may be interested in sponsoring or coaching:

\_\_\_\_\_

**Educational Preparation:**

|                           | NAME &<br>LOCATION | DATES OF<br>ATTENDANCE | NAME OF<br>DEGREE | MAJOR | OVERALL<br>GPA |
|---------------------------|--------------------|------------------------|-------------------|-------|----------------|
| HIGH SCHOOL               |                    | N/A                    | N/A               | N/A   | N/A            |
| COLLEGES/<br>UNIVERSITIES |                    |                        |                   |       |                |
|                           |                    |                        |                   |       |                |
|                           |                    |                        |                   |       |                |
|                           |                    |                        |                   |       |                |
|                           |                    |                        |                   |       |                |

Teaching Experience (If none, list student teaching experience):

| DISTRICT NAME & LOCATION | POSITION | DATES OF EMPLOYMENT | NUMBER OF YEARS | SUPERVISOR | PHONE |
|--------------------------|----------|---------------------|-----------------|------------|-------|
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |

Other Work Experience:

| EMPLOYER NAME & LOCATION | POSITION | DATES OF EMPLOYMENT | NUMBER OF YEARS | SUPERVISOR | PHONE |
|--------------------------|----------|---------------------|-----------------|------------|-------|
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |
|                          |          |                     |                 |            |       |

References:

| NAME | ADDRESS | PHONE | POSITION |
|------|---------|-------|----------|
|      |         |       |          |
|      |         |       |          |
|      |         |       |          |
|      |         |       |          |

Employment Questions:

1. Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)\_\_\_\_\_
2. Have you ever pleaded guilty or no contest to a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)\_\_\_\_\_
3. 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, psychological or sexual abuse or neglect of a child? \_\_\_\_\_
4. Have you ever failed to be re-employed by an educational institution?\_\_\_\_\_

If the answer to any of the foregoing questions is "yes" please explain; use a separate sheet if necessary:

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**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.
4. I understand that this application will be considered active through April 30th. I understand that if I wish my candidacy to remain open after that date I must submit another application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

**Do Not Write Below This Line - For Administrative 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: \_\_\_\_\_

## APPLICANT QUESTIONS

Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Please respond to the following questions in your own handwriting.

1. Why have you chosen teaching/administration as your profession?
2. What student outcomes would you strive for as an administrator?
3. Write a brief autobiography focusing on the important people and events in your life.