



Jayhawk Unified School District #346

Box 278
414 South 5th St.
Mound City, Kansas 66056

913-795-2247

Date of Application _____

Administrative Application

Name _____
(Last) (First) (Middle)

Address _____
_____ Telephone Number (____) _____

Date of Candidate's Availability _____

Employment History:

Are you currently under contract? _____ When does your contract expire? _____

Current Position _____

Current Employer _____

Certification:

Are you certified to be an administrator in Kansas? _____

If you do not have a current administrative certificate explain your status and when you expect to receive your administrative endorsement: _____

Jayhawk Unified School District #346 is an equal employment/educational opportunity agency. Jayhawk Unified School District #346 does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services.

References

Name	Position	Address	Phone Number

List professional memberships relevant to this position/application

State briefly your reasons for wanting to be an administrator in the Jayhawk District.

Educational Views

1. What are your strengths in regard to the various areas of Effective Schools methods?
2. What experiences have you had in regard to Quality Performance Accreditation and/or school improvement activities?
3. What advances have you made in regard to instructional leadership?
4. What role would you have as vice-principal in regard to school climate?
5. Explain your experiences and/or views on evaluations of personnel.

APPLICANT JOB APPLICATION ACKNOWLEDGMENTS

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3. I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.
4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

Signature of Applicant

Date

Applicant Checklist: The following items must be submitted for consideration:

_____ Application _____ Photocopy of Certificate _____ University Transcript _____ Credentials