



Jayhawk Unified School District # 346

Box 278
414 S 5th Street
Mound City, KS 66056

Application for Certified Personnel

913-795-2247

Date of Application _____

Name: _____
(Last) (First) (Middle)

Address: _____
Phone: _____

Position Applying For: (indicate grades and/or school subject in order of preference)

First Preference: _____

Second Preference: _____

Third Preference: _____

Current Employer: _____ Are you under contract? _____

If yes – when does your contractual obligation expire? _____

A photo copy of your current teaching license should accompany this application. If you do not have a current license explain your status and what grade levels/subject areas you expect to be licensed in.

Date of candidates availability: _____

An Equal Employment/Educational Opportunity Agency

Jayhawk USD #346 does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The Superintendent of Schools, 414 S 5th Street, Mound City, KS 66056 (913-795-2247) has been designated to handle inquiries regarding non-discrimination policies

Chronological Professional Record

Student Teaching: In what school did you student teach? _____

City: _____ State: _____ What grade or subjects did you teach? _____

Teaching Experience: Please list in chronological order your teaching experience.

1. School District and Location: _____ Teaching Duties: _____

_____ Dates: _____

2. School District and Location: _____ Teaching Duties: _____

_____ Dates: _____

3. School District and Location: _____ Teaching Duties: _____

_____ Dates: _____

4. School District and Location: _____ Teaching Duties: _____

_____ Dates: _____

5. School District and Location: _____ Teaching Duties: _____

_____ Dates: _____

Attach List if more space for experience is needed.

List the names, positions, addresses and phone number of your past three immediate supervisors:

1. _____
Name Position Address Phone

2. _____
Name Position Address Phone

3. _____
Name Position Address Phone

If you have had other work experience that is relevant to your application, please make a statement below:

Educational Information

High School Attended and Location: _____

College/University Attended and Location (in chronological order):

- 1. _____ Degree and/or Hours: _____ Major: _____
- 2. _____ Degree and/or Hours: _____ Major: _____
- 3. _____ Degree and/or Hours: _____ Major: _____
- 4. _____ Degree and/or Hours: _____ Major: _____
- 5. _____ Degree and/or Hours: _____ Major: _____

Number of semester hours in major field (_____) Undergraduate Hours: _____ Graduate Hours: _____

College/University Honors and Activities: _____

Location of credentials: _____

What Activities can you sponsor and/or coach? _____

List any artistic, musical, theatre, or fine arts skills you have. _____

List any other unique or exceptional skills, abilities or talents you may have. _____

Applicant Check List:

- Completed Application
- College/University Transcript Sent to USD #346
- Copy of Kansas Certificate Enclosed
- Credentials Sent to USD #346

Notice: It is the applicant's responsibility to have these documents completed and forwarded to Jayhawk USD #346. Applications will be reviewed and candidates selected for personal interviews. Candidates will be contacted by a school official.

Additional Data

Please state your reasons for wanting to teach in Jayhawk USD #346:

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

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