



MACON COUNTY R-I SCHOOL DISTRICT



Superintendent's Office

Phone: (660) 385-5719

Fax: (660) 385-7179

Dear Applicant

Thank you for your interest in applying for a position in the Macon R-I School District. Please complete the job application, beginning on the next page, and submit it, along with the following items, for a complete application file:

1. Letter of application, stating your interest in applying for this position.
2. Copy of your latest transcript(s). An official copy of your transcript(s) will be required if you are employed.
3. Include evidence of Missouri Administrative Certificate or eligibility thereof.
4. Request your placement file be sent to Macon R-I or submit 3 or 4 recent letters of recommendation.
5. Submit a copy of your resume.

All application materials should be sent to the building-level principal, as indicated in the job placement notice, using the address at the top of this page.



APPLICATION FOR AN ADMINISTRATIVE POSITION

The Macon R-I 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 the Office of the Superintendent at 660-385-5719.

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

Date _____

Last Name First Name Middle Name

Other names that may appear on your transcripts or records:

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, Initial, Career) Other _____

State(s) _____ Subject(s)/Area(s) _____

Grade Level(s) _____ Expiration date(s) _____

Other information regarding your certification and/or certification status _____

Position(s) for which you are applying:



Educational Preparation:

	NAME & LOCATION	DATES OF ATTENDANCE	NAME OF DEGREE	MAJOR	OVERALL GPA
HIGH SCHOOL		N/A	N/A	N/A	N/A
COLLEGES/ UNIVERSITIES					

Teaching Experience:

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

Administrative Experience:

DISTRICT NAME & ADDRESS	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:



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 and a fingerprint check by the Missouri State Highway Patrol 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.

Signature Date

Do Not Write Below This Line - For Administrative Use Only

Date received: Application _____ Credentials _____ Transcript _____

Date interviewed: _____ Interviewed by: _____

Date and time: Applicant notified _____

Date and time: Applicant accepted _____

Position offered: _____

Salary step and level: _____



