GOESSEL USD #411 GOESSEL, KANSAS 67053

Phone: (620) 367-4601/ Fax: (620) 367-4603

APPLICATION FOR CERTIFIED EMPLOYMENT

Date:	20	
	NOTICE TO APPLICAN	Г:
assure equal opportunit	pard of Education of Unified School D y to qualified individuals regardless of in, ancestry, or age, and to promote the ies to everyone.	their race, religion, color, sex,
	spects of employment relationship incl transfer, training and apprenticeship, c	
(First Name)	(Middle Name)	(Last Name)
Present:	OMPLETE ADDRESS AND PHON	E NUMBER:
Permanent:		
	TEACHING POSITION(S) DE	SIRED
Elementary		
Secondary		
Other		

EDUCATIONAL AND PROFESSIONAL TRAINING

Type of School	Name/Location of School	Type of Degree	Total Semesters in Education	
High School				
Undergraduate				
Graduate				
Special Work				
TEACHING EXPERIENCE				
Name/Location of Scl	hool Gi	ade/Subjects Taught	Dates	
Name				
REFERENCES: List below persons who know about your ability as a teacher and about your general qualifications. Qualification of applicants under consideration may be investigated by correspondence. Five recent references are requested.				
Name and Title		Address and Phone N	umber	
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GENERAL INFORMATION

Do you have a Kansas Teaching Certificate? Yes No Expiration:					
Teacher Certificate Endorsements:					
Are you now under contract? Yes No Expiration:					
Present annual salary: Expected Annual Salary:					
Have you ever been dismissed or asked to resign from employment? Yes No					
If yes, please explain:					
Why do you wish to leave your present position?					
Why do you wish to teach in this district?					
How long do you plan to reside in this area?					
If so, in what field					
What extra curricular activities are you willing to direct and/or sponsor?					
In the event of a vacancy Unified School District No. 411 will need a completed application on file, a copy of your resume', a copy of your teaching certificate, and your credential control to our office. Have you requested your credentials to be sent to our office? Yes No Name of University:					

AGREEMENT

1.	I certify that all the information provided by me in this ap understand that any misstatement, falsification, or omission to hire or, if I am hired and the same is discovered therea	on of information is grounds for refusal	
2.	I authorize any of the persons or organizations referenced all information concerning my previous employment, educ personal or otherwise, with regard to any of the subjects of all such parties from all liability for any damages that may information to you. I authorize any background checks by	cation, or any other information, covered by this application, and I release ty result from furnishing such	
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.		
Appi	licant	Date:	

Unified School District 411 does not discriminate on the basis of sex, race color, national origin, disability or age, in admission or access to, or treatment or employment in, its programs or activities. Any questions regarding the Boards' compliance with Title VI, Title IX, Section 504 or the Americans with Disabilities Act may be directed to the district Compliance officer, who can be reached at 620-367-4601 or the Office for Civil Rights of the Department of Education, telephone (816) 891-8026. The Compliance Officer can also be contacted for the existence and location of accessible services, activities and families.