

**RICH HILL R-IV SCHOOL DISTRICT**  
**703 N. 3<sup>rd</sup> Street**  
**Rich Hill, MO 64779**  
**(417) 395-2418**  
**(417) 395-2407 (Fax)**

**APPLICATION FOR A CERTIFICATED POSITION**

The Rich Hill R-IV 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 superintendent at the above address or phone number.

**Applicants are expected to answer all questions on this application. Write “none” or “not applicable” where necessary.**

Date of application \_\_\_\_\_

\_\_\_\_\_

Last Name	First Name	Middle Name
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Other names that may appear on your transcripts or records:

\_\_\_\_\_

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

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

Street	City	State	Zip
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Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_ E-Mail \_\_\_\_\_

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

Street	City	State	Zip
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Date Available for Employment \_\_\_\_\_

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: \_\_\_\_\_

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

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

**Educational Preparation: (List most recent first.)**

	<b>Name and Location</b>	<b>Dates of Attendance</b>	<b>Name of Degree</b>	<b>Major</b>	<b>Overall GPA</b>
College/University					
College/University					
College/University					

**Teaching Experience: (List most recent first.)**

<b>District Name/Location</b>	<b>Position</b>	<b>Dates of Employment</b>	<b>Number of Years</b>	<b>Immediate Supervisor</b>	<b>Phone Number</b>

**Other Work Experience: (List most recent first.)**

<b>Employer Name /Location</b>	<b>Position</b>	<b>Dates of Employment</b>	<b>Number of Years</b>	<b>Immediate Supervisor</b>	<b>Phone Number</b>

**References:**

<b>Name</b>	<b>Position</b>	<b>Address</b>	<b>Phone Number</b>

**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 education institution? \_\_\_\_\_

**If the answer to any of the foregoing questions is “yes”, please explain using a separate sheet of paper.**

**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.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**