

WEST ST. FRANCOIS COUNTY R-IV SCHOOL DISTRICT  
1124 Main Street  
Leadwood, Missouri 63653

**APPLICATION FOR AN ADMINISTRATIVE POSITION**

The 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 Dr. Kevin Coffman at (573) 562-7535.

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

**PERSONAL DATA**

Application Date \_\_\_\_\_

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Middle

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

Present Address \_\_\_\_\_

Street

City

State

Zip

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

Street

City

State

Zip

Telephone Numbers (include area code) \_\_\_\_\_ or \_\_\_\_\_

Date available \_\_\_\_\_

Certification: Type \_\_\_\_\_

(Life, PC1, Etc.) Other \_\_\_\_\_

State(s) \_\_\_\_\_

Subject \_\_\_\_\_

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

Expiration Dates \_\_\_\_\_

Other information regarding your Certification and/or certification status: \_\_\_\_\_

Position(s) for which you are applying: \_\_\_\_\_

	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 ( If none, list student teaching experience):

District Name & Location	Position	Dates of Employment	Number of Years	Supervisor	Phone

Administrative Experience:

District Name & Address	Position	Date of Employment	Number of Years	Supervisor	Phone Number

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 in necessary:

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**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.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

Do Not Write Below This Line - For Administrative Use Only

Date received: Application \_\_\_\_\_ Credentials \_\_\_\_\_ Transcripts \_\_\_\_\_

Date interviewed: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

Date and time: Applicant notified \_\_\_\_\_

Date and time: Applicant accepted \_\_\_\_\_

Position offered: \_\_\_\_\_

Salary step and level: \_\_\_\_\_