Certified Position Applicants



Please Include the Following Items With Your Application

 Resume with References
 Proof of Certification

NORWOOD R-I SCHOOL DISTRICT

Instill the need Inspire to Succeed Empower to Lead

BOARD OF EDUCATION

Rick Calhoun

John Kelly DeDe Richardson

Shawn Chadwell

Rhonda Coatney

Debbie Shelton

Chad Sullivan

675 N HAWK AVENUE NORWOOD, MO 65717

> Phone: (417) 746-4101 Fax: (417) 746-9950

ADMINISTRATION

Shannon Crain
Superintendent
Kevin Johnson
7-12 Principal
Christy Chadwell
EC-6 Principal

APPLICATION FOR A CERTIFIED POSITION

The Norwood 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 Norwood School at 417-746-4101.

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

applicable" where necessary.

Today's Date ______

Name: ______
Other names that may appear on your transcript or records:

Current Address: _______
(Street) (City) (Zip)

Home Phone: (_____) Cell Phone: (_____).

Position(s) for which you are applying: _______
Subject(s): ______ Grade Level ______
Are you available for substitute teaching? ______ Paraprofessional? ______
Extra duty positions you may be interested in sponsoring or coaching:

EDUCATION RECORD

	Name & Location	Dates of Attendance	Name of Degree	Major	Overall GPA
High School					
College/Universities					

Certification: Type	(Life, PC1, Etc.) Other
State(s)	Subject(s)
Grade Level(s)	Expiration date(s)
Other information regarding your certificati	on and/or certification status:

TEACHING EXPERIENCE

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

OTHER	$W \cap DV$	EVDED	IENICE
OTHER	WURK	FXPFR	IEINU E

EMPLOYER NAME & LOCATION	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?		
ne	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 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 even 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.
- 4. I understand that this application will be considered active through April 30th. I understand that if I wish my candidacy to remain open after that date I must submit another application.

Signature		Date
Do Not Write Bo	elow This Line - For A	dministrative Use Only
Date received: Application	Transcripts	Letters of Reference
Date interviewed:	Interviewed by:	
MACHS: Approved		
Date and time: Applicant notified		
Date and time: Applicant accepted		
Position offered:		
Salary Step and level:		

APPLICANT QUESTIONS

Nar	ne:	
Plea	ase	respond to the following questions in your own handwriting.
	1.	Why have you chosen teaching as your profession?
	2.	What student outcomes would you strive for as a teacher?
	3.	Why should Norwood School hire you over other applicants that may have the same
		qualifications?