SOUTHWEST LIVINGSTON COUNTY R-I

4944 Highway DD Ludlow, Missouri 64656 FAX 660-738-4441 Web: www.southwestr1.org

Dear Applicant:

Thank you for your interest in applying for a teaching position with the Southwest Livingston County R-I School District. We ask that the following items be addressed as a part of the application process:

- 1. Complete the enclosed teacher application form in its entirety.
- 2. Enclose a letter of introduction and interest in the position.
- 3. Enclose a copy of your latest transcript(s) with the application. An official copy of your transcript(s) will be required if you are employed.
- 4. Enclose a copy of your Missouri teaching certificate or verification of eligibility for a Missouri teaching certificate.
- 5. Request your placement file be sent to us, or enclose 2 to 3 recent letters of recommendation.
- 6. Before employment a Background Check will be completed.

Your application will become active once all of the above information has been received. Please call Supt. or Carrie Gilliland, Secretary if you have any questions about the application process. Applications may be emailed, faxed or delivered to the above address.

Thank you again for your interest and we will be looking forward to receiving your application.

SOUTHWEST LIVINGSTON CO. R-I SCHOOL DISTRICT 4944 HIGWAY DD LUDLOW, MISSOURI 64656 660-738-4433

Form 4120

APPLICATION FOR A CERTIFICATED 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

Supt. at 660-738-4433.

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 ye	our transcripts or records:		
Social Security Number			
Current Address			
Street	City	y State	Zip
Current Phone ()			
Permanent Address		Citata	77'
Street	City	y State	Zip
Permanent Phone ()			
Date Available			

Certification: Type			(Life, PC1, Etc.) Other			
State(s)	State(s)Subject(s)					
Grade Level(s)_		E>	xpiration date(s)			
Other informati	on regarding yo	our Certification a	nd/or certification	status:		
Position(s) for v	vhich you are a	pplying:				
Subject(s)						
Grade Level(s)_						
Are you availab	le for substitute	e teaching?	Paraprofession	onal?		
Extra duty positions you may be interested in sponsoring or coaching:						
Educational Pre	paration: (Con	nplete this section	OR include your I	Resume)		
	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

Other Work Experience:

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

References:

NAME	ADDRESS	PHONE	POSITION

Employment Qu	estions:
---------------	----------

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?

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.
- 4. I understand that this application will be considered active through June 30th. I understand that if I wish my candidacy to remain open after that date I must submit another application.

Signature		Date		

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:				