

Troy Unified School District No. 429

Professional Application

An Equal Opportunity Employer/Affirmative Action Employer

Directions:

Please **TYPE** the first three pages. This professional application is only one part of your "Completed Application File". Applicants must have a completed application file to be considered for a new position. It is the responsibility of the applicant to make certain the application file is complete. This file must contain the following information: APPLICATION FORM, TRANSCRIPTS, CREDENTIALS, a COPY OF YOUR TEACHING CERTIFICATE OR EVIDENCE OF ELIGIBILITY FOR CERTIFICATION, and a PERSONAL RESUME. Application materials should be sent to:

Clerk of the Board
Troy Unified School District 429
230 West Poplar, Box 190
Troy, Kansas 66087

Date _____

NAME _____
First Last MI Social Security Number

Home Address _____
Street/RFD/Box City State Zip

Present Address _____
Street/RFD/Box City State Zip

Present Position _____
Subject Area Grade Level

Telephone Number (_____) _____ - _____ E-mail Address _____

POSITION DESIRED

Elementary (Mark your first choice '1', second choice '2', etc.): Kdg _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____

Middle School: Primary Teaching Field _____ Secondary Teaching Field _____

High School: Primary Teaching Field _____ Secondary Teaching Field _____

Date you will be available _____

Student activities that you feel qualified to sponsor _____

CERTIFICATION:

Type of Certificate held _____ State _____ Date Issued _____

Subjects you are certified to teach _____

Other areas of certification _____

Practice Teaching – Grade Level (s) _____ Subject(s) _____

School _____ Supervisor _____

EDUCATION:

Undergraduate

College/University (Location & Address)	Dates Attended	Degree	Major	Hrs	Minor	Hrs

Graduate

College/University (Location & Address)	Dates Attended	Degree	Major	Hrs	Minor	Hrs

Total Semester Hours in Education _____ Total College Semester Hours _____

What special strengths, talents, and/or unique qualities you possess which might be useful in your employment? _____

PERSONAL INTERVIEW

If you are invited for a personal interview, do you prefer a particular day of the week and time of day? _____

If so, please specify. _____

Please provide telephone numbers where you can be reached.

1. _____ (_____) _____ - _____

2. _____ (_____) _____ - _____

3. _____ (_____) _____ - _____

PROFESSIONAL EXPERIENCE: (Please list the most recent experience first.)

School System	City	State	Subject/Grade Levels	Dates of Employment
			Total Years of Experience	

OTHER WORK EXPERIENCE: (Please list the most recent experience first.)

Employer	Address	Position	Dates of Employment

RECOMMENDATIONS: (Principals, Superintendents, Supervising Teachers. Please include your most recent supervisor.)

Name	Address	Telephone Number	Position

Applicant Job Application of Acknowledgments

- 1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.**
- 2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.**
- 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 you doing so.**
- 4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation and I release you from all liability for any damages that may result from your doing so.**

Signature of Applicant

Date