



PERSONAL INFORMATION

Date _____ Social Security No. _____ Phone _____

Name _____
 First Middle Last Other names

Present Address _____
 Street City/State/Zip

Permanent Address _____
 Street City/State/Zip

Name and address of someone who will always know your address. Do not list husband or wife.

 Name Street City/State Phone

What is your present position? _____ Date available for employment _____

Are you now under contract? _____ Salary _____ Present contract expiration date _____

POSITION DESIRED

Number Elementary preference 1st, 2nd, 3rd choice; or list subject preference for Middle and Senior High.

	Elementary	Middle (6-8)	Senior High (9-12)
Pk-Kindergarten	_____	1. _____	1. _____
Primary	_____	2. _____	2. _____
Intermediate (4-5)	_____	3. _____	3. _____

Special Education _____
 Type

Other _____ Extra Duty _____
 Specify Activity or Sport

Administration _____ Specify Area _____

MISSOURI CERTIFICATION

List current Missouri Teaching Certificates held

Subject/Area of Certification	Type of Certificate	Grades/Levels	Expiration Date

Are you currently a student? Yes No Indicate certification you will receive upon graduation. _____

Are you currently a member of the Missouri Retirement System? Yes No

Indicate certification held from another state if applicable _____

National Teacher Exam Yes No If yes, score _____

EDUCATIONAL PREPARATION

HIGH SCHOOL	LOCATION	ACTIVITIES AND HONORS

COLLEGES/UNIVERSITIES AND LOCATIONS	DATES ATTENDED FROM - TO	MAJOR FIELD	GPA	DEGREE AND/OR SEMESTER HOURS	GRADUATION DATE
UNDERGRADUATE					
GRADUATE					

Number of graduate hours earned since last degree was confirmed _____

Are you working toward a higher degree? _____ If so, what degree? _____

STUDENT TEACHING/INTERNSHIP

Name of school _____ District _____

Address _____

Cooperating Teacher _____

Assignments (Subject & Grades) _____

Grade Received _____ Date _____ to _____

TEACHING EXPERIENCE

Starting with the **most recent** year, list each complete year of full-time teaching or administrative experience. **DO NOT** list partial years, student teaching, para-professional positions, substitute teaching, graduate teaching assistantship, or college teaching.

Complete years From - To	Number Months	School, Complete Address	Assignment (Subject, Grade Level, Administrative, Etc.)	Reason For Leaving

OTHER WORK EXPERIENCE

Begin with the most recent position

Employer	City/State	Type of Position	Dates From - To	No. of Years	Full-time or Part-time
			-		
			-		
			-		
			-		

PROFESSIONAL REFERENCES

Please list the names of three persons whom you authorize the Lafayette County C-1 School District to contact for references concerning your qualifications. These should be persons who are qualified to answer questions concerning your qualifications for the position you seek. Include supervisors, principals and superintendents under whom you have taught. If you have not taught previously, include the names of instructors who have supervised your student teaching or cooperating teacher.

Name	Present Address	Phone Number	Official Position	Dates Acquainted

ACTIVITIES, SPECIAL INTERESTS AND AWARDS

What activities do you feel qualified to sponsor or coach? _____

College activities and honors _____

Community organizations and activities in which you have participated (youth work, service clubs, etc.)
(Organizations should be omitted if, by their nature or function, the member's race, color, national origin, sex or a handicap can be determined). _____

Professional organizations to which you belong _____

If appointed to the staff, are you willing to accept assignments where your services are needed? Yes No

Have you ever been discharged or asked to resign from a position? Yes No

If yes, state the name of employer, the date and the reasons for terminations or request for resignation.

This district is an equal opportunity employer and does not discriminate because of race, color, creed, age, sex, national origin, marital or veteran status, or the presence of a non-job related medical condition or handicap. Membership in professional associations is not a condition of employment.

AGREEMENT

I hereby certify that the above information, to the best of my knowledge, is true, accurate and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the district which reserves the right to accept or reject it. I further agree to observe all rules, regulations and policies of the district now in force and effect or as they may change during my employment, if I am employed by the district. I also hereby authorize the district to conduct a background investigation and authorize release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers, educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and the reference source from any liability in connection with its release or use.

Signature of Applicant

Date

LAFAYETTE COUNTY C-1 SCHOOL DISTRICT
TEACHER APPLICATION SUPPLEMENT

Name _____ Date _____

PROFESSIONAL STATEMENT:

Please write a brief response to the statements below in your own handwriting. Your application will not be complete without this information.

If you were employed as a teacher in the Lafayette County C-1 School District, what skills and personal qualities would you bring to your assignment to assure a successful teaching experience?

What approaches do you find to be most effective in motivating students?

Please check the area below in which you have knowledge/skill:

- | | |
|--|--|
| <input type="checkbox"/> Research-based instruction | <input type="checkbox"/> Whole language |
| <input type="checkbox"/> Thematic teaching | <input type="checkbox"/> Peer coaching |
| <input type="checkbox"/> Cooperative learning | <input type="checkbox"/> Multi-grade instruction |
| <input type="checkbox"/> Outcome-based education | <input type="checkbox"/> Block scheduling |
| <input type="checkbox"/> Use of computers in instruction | <input type="checkbox"/> Middle level instruction (5-8) |
| <input type="checkbox"/> Working in a multi-cultural setting | <input type="checkbox"/> Using assertive discipline |
| <input type="checkbox"/> Working with at-risk learners | <input type="checkbox"/> Reading/Writing in the content area |
| <input type="checkbox"/> Working with LD/BD/MH/EMH students | <input type="checkbox"/> Interdisciplinary teaming |
| <input type="checkbox"/> Other (Please list) | |
