

APPLICATION FORM FOR CERTIFIED STAFF  
**UNIFIED SCHOOL DISTRICT NO. 273**  
**Mitchell County, Kansas**

Each applicant for a position in the Unified District 273 Schools will fill in an application form. Failure to comply with the directions given will be to the disadvantage of the applicant. If the applicant is selected and accepts a position in the Unified District 273 Schools, the information given herein becomes a part of the Board of Education's professional record. Therefore, be sure that all information is accurate, complete, and legible. The amount of space provided for answering some items is necessarily and purposely limited; we suggest you word answers to these items carefully. Please be sure to include your complete transcript with this application and notify your placement bureau to send a set of your credentials to the U.S.D. 273 office.

Please provide all information requested and respond to all of the questions on this form.

**Superintendent of Schools**  
**Unified School District No. 273**  
**P.O. Box 547**  
**3075 US 24 HWY**  
**Beloit, Kansas 67420**

1. Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Last) (First) (Middle)

2. Present Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)  
 Phone/s: \_\_\_\_\_ At this address until (date): \_\_\_\_\_

3. Permanent Address if Different: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Email Address: \_\_\_\_\_

5. Personal History
- a. Do you have any impairments - physical, mental or medical - which would interfere with your ability to do the job for which you have applied? (yes or no):  
 If Yes, please explain: \_\_\_\_\_
  - b. Do you have or are you a carrier of any communicable disease which may endanger others?  
 If Yes, please explain: \_\_\_\_\_
  - c. Are there any positions for which you should not be considered because of a physical or mental handicap?  
 If Yes, please explain: \_\_\_\_\_
  - d. Have you ever been convicted of a felony? (yes or no):  
 If Yes, please explain: \_\_\_\_\_
  - e. Subsection (d) of Section 1 of Senate Bill 432 provides that a local board of education may offer "provisional employment" to a person while the results of a criminal history background check on the person are pending. It further provides that the contract of employment for such a person "shall specify" that the contract is subject to termination if the results of the background check reveal a conviction of an offense, or an attempt to commit an offense, specified in K.S.A. 1999 Supp. 72-1397.

6. Position you are applying for (Subjects and/or Grades) in Order of Preference:

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_

7 School term for which you will be available for employment. \_\_\_\_\_

8. At the time of making application, are you under contract for the present school term? \_\_\_\_\_  
If so, when does this contract expire? \_\_\_\_\_

9 Kind of teaching certificate you now hold:

<u>TYPE/SUBJECT</u>	<u>GRADE LEVELS</u>	<u>DATE OF ISSUE</u>	<u>DATE OF EXPIRATION</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

10 List activities you are competent and willing to direct or coach: (Debate, plays, band, orchestra, vocal groups, student council, publications, football, basketball, track, etc.)

\_\_\_\_\_  
\_\_\_\_\_

11. List all professional organizations of which you are a member and offices held.

\_\_\_\_\_  
\_\_\_\_\_

12. UNDERGRADUATE ACADEMIC PROGRAM. Please list all secondary schools, colleges and universities attended as an undergraduate.

<u>SCHOOL OR COLLEGE</u>	<u>LOCATION</u>	<u>DATES ATTENDED</u>		<u>DEGREE, IF ANY</u>
		<u>FROM</u>	<u>TO</u>	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List your major teaching fields in order of preference:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

List minor teaching fields you might wish to teach in order of preference:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

List undergraduate honors received:

\_\_\_\_\_  
\_\_\_\_\_

Please list your undergraduate college extra-curricular activities in order of their importance to you and tell why each was important.

\_\_\_\_\_  
\_\_\_\_\_

13. GRADUATE ACADEMIC PROGRAM. Please list all universities attended as a graduate student.

<u>UNIVERSITY</u>	<u>LOCATION</u>	<u>DATES ATTENDED</u>		<u>DEGREE, IF ANY</u>
		FROM	TO	
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List your graduate major and minor fields:

Major: \_\_\_\_\_

Minor: \_\_\_\_\_

Graduate honors received: \_\_\_\_\_

What definite plans have you for preparing yourself further for teaching? \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14. MILITARY RECORD. If you were a member of the armed forces, please list the branch of service, date entered, date separated, condition of separation and occupational specialty.

\_\_\_\_\_  
 \_\_\_\_\_

15. RECORD OF EMPLOYMENT. PLEASE GIVE THE DATES OF EMPLOYMENT, TITLE OR POSITION, NAME OF EMPLOYER, ADDRESS, AND SALARY. Include changes of position within one company or school. Arrange with more recent position toward the top. Do not include part-time or summer employment unless you consider it significant. It is important that the application account for any substantial periods of time.

Dates of Employment	Position	School or Company Name, Address, & Phone Number	Salary
			\$
			\$
			\$
			\$
			\$

16. Please give a candid description of yourself, stressing those qualities - assets and liabilities - which you feel characterize your work in your present position. This will also apply if you are student-teaching.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

17. Please describe any experiences which you feel have significantly contributed to your abilities for the position you are seeking.

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18. In the event we request a personal interview, when would this be most convenient?

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19. REFERENCES. Please list below the names and addresses of three to five persons from whom we may solicit letters of appraisal regarding your ability and your work.

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE NUMBER</u>	<u>LENGTH OF TIME KNOWN</u>	<u>NATURE OF ASSOCIATION</u>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
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20. The space below is provided to permit you to discuss any matter other than the items of information already requested which you believe will be of significant value to us. A resume may be attached if you so desire.

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21. INFORMATION FOR THE APPLICANT:

YOUR APPLICATION. We appreciate sincerely the time and interest you have given in completing your application to the Unified 273 School system. We hope to reciprocate this by giving your application prompt consideration. If you have other questions concerning employment in the Unified District 273 Schools or the community itself, we will make every effort to answer them for you.

RETURN THIS APPLICATION TO:

*Superintendent of Schools  
Unified District No. 273  
P.O. Box 547, 2020 N. Independence  
Beloit, Kansas 67420*

Or Email to: [beloitschools@usd273.org](mailto:beloitschools@usd273.org)

NON-DISCRIMINATION STATEMENT. Unified School District No. 273 does not discriminate on the basis of race, color, national origin, sex, age, or handicap in admission, access to, treatment, or employment in its programs or activities.