

APPLICATION FORM FOR CLASSIFIED 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 employee's work 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 previous work record and references where indicated. Completed applications should be returned 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 _____ Phone _____
(Street) (City) (State) (Zip Code)

3. Where can we reach you during the day? _____ Phone _____
(present work place) (Work 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?

(yes or no)

If Yes, please explain: _____

c. Are there any positions for which you should not be considered because of a physical or mental handicap? _____

(yes or no)

If Yes, please explain: _____

d. Do you have any restrictions which limit the amount of weight you are able to lift? _____
(yes or no)

If Yes, please explain: _____

e. Have you ever been convicted of a felony? _____
(yes or no)

If Yes, please explain: _____

f. 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. Positions you are applying for in Order of Preference:

1. _____
2. _____
3. _____

7. If selected for employment when could we expect you to be able to start work?
(Date) _____

8. Where are you working at the present time? _____
(Name of Business)

9. Can your present employer be contacted? _____
(Yes or No)

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

16. 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>
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17. 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.

18. INFORMATION FOR THE APPLICANT:

YOUR APPLICATION. We appreciate sincerely the time and interest you have given in making 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*

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.