

SPENCER COMMUNITY SCHOOL DISTRICT

23 East 7th Street, Box 200, Spencer, IA 51301

Phone: (712) 262-8950

Fax: (712) 262-1116

AA/EEO Employer

Application Date: _____ Date Available: _____

Position(s) for which you are applying: _____

Are you available full-time? _____ Are you willing to consider less than full time? _____

Name: _____ Social Security #: _____

U.S. Citizen? _____ Are you legally eligible to work in the United States? _____

Current Home Phone: _____ Permanent Phone: _____

Work Phone: _____

Current Address: _____

Permanent Address: _____

EDUCATION:

High School	Location	Dates Attended/Graduated

College	Location	Degree – Major/Minor Fields	Dates Attended/Graduated

Student Teaching	Location	Grade(s)/Area	Dates

Paid Teaching Experiences	Location	Grade(s)/Area	Dates

References: List at least three who have evaluated your teaching skills and abilities.

NAME	Employer & Address	Position	Phone: Work and Home

Have you applied for your Iowa teacher license? yes no Iowa Folder # _____

Do you hold a teacher license from another state? yes no If so, which state(s) _____

What certifications, endorsements and approvals have you achieved (include coaching)? _____

Have you previously held a licensed position in an Iowa public school district? yes no

If yes, have you successfully completed an official probationary period? yes no

If yes, what was the length of the probationary period? yes no

Are you on a sex offender registry? yes no

Are you on the Department of Human Services' child abuse registry? yes no

Have you ever been convicted of a felony or misdemeanor (excluding traffic violations)? yes no

If yes, please provide date, incident, city/state of charge:

Responding "yes" to any of the previous questions is not an automatic bar to employment. The date of the offense, and the relationship between the offense and the position for which you are applying will be considered.

Are you able to perform, with or without reasonable accommodation, the essential job functions required of this position? yes no

If no, explain: _____

SERVICE RECORD:

Did you serve in the United States Armed Forces: yes no
If yes, dates of service: _____ Branch of Service: _____
Discharge status: Honorable _____ Other _____

All persons who apply, are interviewed and become a finalist for a position will be expected to sign a waiver for any or all of these agencies: National Criminal History (FBI); Iowa Criminal History (DCI); Department of Human Services; and Department of Transportation. The finalist will be expected to complete a physical. The information obtained within the reports will be used to determine 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 fact shall be sufficient cause for disqualification of this application or termination of employment. I authorize verification of any of this information. I authorize all current and former employers to release any information concerning my background. I understand that this application is not a contract of employment. I also understand that if hired, regardless of any oral representation to the contrary, the employment relationship is terminable at-will.

Signature _____

Date _____