

WESTVIEW SCHOOL DISTRICT
7441 Westview Road
Neosho, MO 64850
Telephone: 417-776-2425
Fax: 417-776-1994
Email: mhailey@wc6.org

Dear Applicant:

Thank you for your interest in applying for a teaching position with the Westview School District. We ask that the following items be addressed as a part of the application process:

1. Complete the enclosed application form.
2. Enclose a copy of your latest transcript(s) with the application. An official copy of your transcript(s) will be required if you are employed.
3. Request your placement file be sent to us, or enclose recent letters of recommendation.
4. Forms for child abuse of neglect and criminal record checks must be completed prior to employment.

Your application will become active once all of the above information has been received. Thank you again for your interest and we will be looking forward to receiving your application.

Sincerely,

Misty Hailey
Westview School District

Last Name _____ First Name _____
Certification _____

APPLICATION FOR CERTIFICATED POSITION

The Westview School District considers applicants for all positions without regard to race, color, religion, sex, national origin or disability. If you have a disability or handicap which may require accommodation for you to participate in our application process (including filling out this form, interviewing or any other pre-employment procedure or requirement), please make us aware of any accommodation you feel is necessary. If you have any inquiries, complaints or concerns about any pre-employment procedure or requirement, including completing this application, or about the District policy of non-discrimination, you may contact Misty Hailey, Superintendent/Principal at 417-776-2425.

All applicants are expected to answer all questions on this application. Answer “none” or “not applicable” where necessary.

Name: Last _____ First _____ Middle _____

Social Security Number _____ - _____ - _____

Current address _____
Street City State Zip

Current phone (_____) _____ - _____ Cellular phone (_____) _____ - _____

Date Available _____ E-mail _____

Certification: Type _____ (Life, PC1, etc.) Other _____

State(s) _____ Subject(s) _____

Grade level(s) _____ Expiration date(s) _____

Position(s) for which you are applying:

Subject(s) _____

Grade level(s) _____

Are you available for substitute teaching? _____ Para-professional? _____

Extra duty positions you may be interested in sponsoring or coaching: _____

If A, B, C, and D are addressed with an attached resume, please check resume attached.

(A) Educational Preparation:

Resume attached_____

	NAME & LOCATION	DATES OF ATTENDANCE	NAME OF DEGREE	MAJOR	OVERALL GPA
HIGH SCHOOL		N/A	N/A	N/A	N/A
COLLEGES/ UNIVERSITIES					

(B) Teaching Experience (If none, list student teaching experience):

Resume attached_____

DISTRICT NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	NUMBER OF YEARS	SUPERVISOR	PHONE

(C) Other Work Experience:

Resume attached_____

EMPLOYER NAME & LOCATION	POSITION	DATES OF EMPLOYMENT	NUMBER OF YEARS	SUPERVISOR	PHONE

(D) References:

Resume attached_____

NAME	ADDRESS	PHONE	POSITION

READ CAREFULLY BEFORE SIGNING

I acknowledge and agree to the following provisions as conditions to consideration of my application for employment:

1. I hereby authorize my current and former employers and references to furnish any information about me and about my work experience. I release my current and former employers and references from any and all liabilities or damages of any nature as a result of providing such information. My current and former employers and references may rely on a signed copy of this release.
2. I understand and consent to having criminal and arrest records checks as well as background checks by the Missouri Division of Family Services as a condition for consideration of my application for employment.
3. I certify that the answers given in this application are true and complete to the very best of my knowledge. In the event I am employed by the District and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understand that my employment may be terminated at any time after discovery of the false or misleading information.
4. I understand that this application will be considered active for one year. I understand that if I wish my candidacy to remain open after that date I must submit another application.
5. Have you ever been arrested for, charged with, or been convicted of a felony or misdemeanor (excluding traffic offenses with no jail sentence or for which the fine was less than \$100)?_____

6. Have you ever pleaded guilty or no contest to a felony or misdemeanor (excluding traffic offenses with no jail sentence or for which the fine was less than \$100)? _____
7. Has the Missouri Division of Family Services or a similar agency in any other state or jurisdiction ever issued a determination or finding of cause or reason to believe or suspect that you have engaged in physical, emotional, psychological, or sexual abuse or neglect of a child? _____
8. Have you ever failed to be re-employed by an educational institution? _____ If the answer to any of the foregoing questions is "yes" please explain.

Signature

Date

Do Not Write Below This Line - For Administrative Use Only

Date received: Application _____ Credentials _____ Transcripts _____

Date interviewed: _____ Interviewed by: _____

Date and time: Applicant notified _____

Date and time: Applicant accepted _____

Position offered: _____

Salary step and level: _____