



HAYTI R-II SCHOOL DISTRICT

500 N. Fourth Street
P.O. Box
Hayti, Mo. 63851
Phone:(573) 359-6500
Fax: (573) 359-6502

Jackie Johnson, Superintendent



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Kent Reynolds, President
Christopher Wooten, Vice-President
Rickey Robinson, Memeber

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Wendell Lockridge, Member
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Mark Cartee, Member
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Dear Applicant:

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

1. Complete the enclosed teacher 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. Enclose a copy of your Missouri teaching certificate or verification of eligibility for a Missouri teaching certificate.
4. Request your placement file be sent to us, or enclose 3 or 5 recent letters of recommendation.
5. If employed you will be required to fill out a Request for Criminal Record Check for Adult Abuse and Neglect. All new employees must have a background check through 3M/Cogent the amount is \$44.80.

Your application will become active once all of the above information has been received. Your application will remain active until August 30th at which time you must resubmit a new application. Please call the Administration Office at (573) 359-6500 if you have any questions about the application process.

Sincerely,

Jackie Johnson
Superintendent

HAYTI R-II SCHOOL DISTRICT

ADMINISTRATION OFFICE

P.O. BOX 469

500 NORTH FOURTH STREET

HAYTI, MO 63851

Telephone: 573-359-6500 Fax: 573-359-6502

APPLICATION FOR A CERTIFICATED POSITION

The 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 requirements), please make us aware of any accommodation you feel is necessary. If you have any inquiries, complaints or concern about any pre-employee procedure or requirement, including completing this application, or about the District policy on non-discrimination, you may contact the administration office at 573-359-6500.

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

Date: _____

Last Name	First Name	Middle Name
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Other names that may appear on your transcripts or records: _____

Social Security Number _____ - ____ - _____

Current Address _____

Street	City	State	ZIP
Current Phone # (____) _____			

Permanent Address _____

Street	City	State	ZIP
Permanent Phone (____) _____			

Date Available _____

Certification: Type _____ (Life, PCI, Etc.) Other _____

State(s) _____ Subject(s) _____

Grade Level(s) _____ Expiration date(s) _____

Other information regarding your Certification and/or certification status: _____

Position(s) for which you are applying: _____

Subject(s) _____

Other Work Experience:

Employer Name and Location	Position	Dates of Employment	Number of Years	Supervisor	Phone

References:

Name	Address	Phone	Position

Employment Questions

1. Have you ever been arrested for, or charged with or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)_____
2. Have you ever pleaded guilty or no contest to a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100.00)_____
3. 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?_____
4. 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; use a separate sheet if necessary:

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 through August 30th. I understand that if I wish my candidacy to remain open after that date I must submit another application.

SignatureDate

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 & level: _____