

## ATTENTION APPLICANTS!

Please forward the following documents to:

Wade Schroeder, Superintendent  
Braymer C-4 School District  
400 Bobcat Ave.  
Braymer, MO 64624

1. District Application
2. Letter of Intent
3. Current Resume with References and Phone Numbers
4. College Transcripts
5. Missouri Teaching Certificate
6. College Placement File

**Braymer C-4 School District**

**APPLICATION FOR A CERTIFICATED POSITION**

The Braymer C-4 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 an 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 the Superintendent at (660) 645-2284

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

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, Initial, Career) \_\_\_\_\_

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) \_\_\_\_\_

Grade Level(s) \_\_\_\_\_

Are you available for substitute teaching? \_\_\_\_\_ Paraprofessional? \_\_\_\_\_

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

\_\_\_\_\_

**Educational Preparation:**

	NAME & LOCATION	DATES OF ATTENDANCE	NAME OF DEGREE	MAJOR	OVERALL GPA
High School		N/A	N/A	N/A	N/A
Colleges/ Universities					

Teaching/Administrative Experience: (If none, list student teaching experience.)

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

Other Work Experience:

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

References:

NAME	ADDRESS	PHONE	POSITION

Employment Questions:

1. Have you ever been arrested for, 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 pled 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 engaged in physical, emotional, psychological or sexual abuse or neglect of a child? \_\_\_\_\_
4. Has your employment ever been non-renewed? \_\_\_\_\_
5. Have you ever been served with a notice of deficiencies or warning letter? \_\_\_\_\_
6. Have you ever been served with a statement of charges seeking the termination of your employment? \_\_\_\_\_
7. Have you ever resigned to avoid being served with a statement of charges seeking the termination of your employment? \_\_\_\_\_
8. Have you ever been fired, dismissed, terminated or otherwise involuntarily discharged from your employment? \_\_\_\_\_
9. Have you ever resigned in lieu of being fired, dismissed, terminated or otherwise involuntarily discharged from your employment? \_\_\_\_\_
10. Have you ever entered into a separation or settlement agreement in connection with either the voluntary or involuntary termination of your employment? \_\_\_\_\_

If the answer to any of the previous 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 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 realize 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 a period of six months. I understand that if I wish my candidacy to remain open after that date, I must submit another application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



**Do Not Write Below This Line – For Administrative Use Only**

Date Received:

Application \_\_\_\_\_ Placement File \_\_\_\_\_ Transcripts \_\_\_\_\_

Teaching Certificate \_\_\_\_\_ Child Abuse Check \_\_\_\_\_ Letter of Intent \_\_\_\_\_

Criminal Record Check \_\_\_\_\_

Date Interviewed: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

Date and Time: Applicant notified \_\_\_\_\_

Date and Time: Applicant accepted \_\_\_\_\_

Position offered: \_\_\_\_\_

Salary step and level: \_\_\_\_\_

**RELEASE**

**PLEASE READ BEFORE SIGNING**

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

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.

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.

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.

I understand that this application will be consider active through April 30<sup>th</sup>. I understand that if I wish my candidacy to remain open after this date, I must submit another application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date