

STUART PUBLIC SCHOOLS
STUART OKLAHOMA
APPLICATION FOR NON-CERTIFIED POSITION

DATE: _____ SOCIAL SECURITY NUMBER: _____

NAME: _____ PHONE: _____

PERMANENT ADDRESS: _____

(STREET/BOX) (CITY) (STATE) (ZIP)

PRESENT ADDRESS: _____

(STREET/BOX) (CITY) (STATE) (ZIP)

YOUR CHOICE OF POSITIONS

FIRST CHOICE: _____

SECOND CHOICE: _____

THIRD CHOICE: _____

HIGH SCHOOL FROM WHICH GRADUATED: _____

GRADUATION DATE OR GED DATE: _____

UNDERGRADUATE UNIVERSITY OR COLLEGE: _____

GRADUATION DATE: _____

DEGREE RECEIVED: _____

MAJOR/MINOR: _____

GPA: _____

GPA IN CERTIFIED AREAS: _____

OTHER UNDERGRADUATE UNIVERSITIES ATTENDED: _____

NAME OF INSTITUTION: _____

DATE OF ATTENDANCE: _____

GPA: _____

POSTGRADUATE UNIVERSITIES ATTENDED: _____

DATES OF ATTENDANCE: _____

GRADUATION DATE: _____

DEGREE RECEIVED: _____

MAJOR: _____

GPA: _____

OTHER POSTGRADUATE UNIVERSITIES ATTENDED: _____

DATES OF ATTENDANCE:

SUBJECTS AND HOURS COMPLETED: _____

GPA: _____

SPECIAL HONORS ATTAINED OR OFFICES HELD: _____

ARE YOU ABLE TO PERFORM THE PHYSICAL, MENTAL, AND ATTENDANCE REQUIREMENTS OF
THIS POSITION? YES _____ NO _____

HAVE YOU HAD FULL-TIME ACTIVE MILITARY SERVICE? DATE: _____ TO _____
 (GIVE MONTH, DAY, YEAR)

WORK EXPERIENCE:

EMPLOYER	CITY AND STATE	POSITION	FROM	TO

HAVE YOU EVER BEEN DISMISSED FROM EMPLOYMENT? YES _____ NO _____

IF SO, PROVIDE DETAILS: _____

REFERENCES: (May use past employers)

NAME	OFFICIAL POSITION & ORGANIZATION	NAME, CITY, STATE, ZIP, PHONE

PLEASE ANSWER THE FOLLOWING QUESTIONS IN YOUR OWN HANDWRITING:

1. BRIEFLY DISCUSS WHY YOU WOULD LIKE TO WORK IN AN EDUCATION ENVIRONMENT.

2. BRIEFLY DISCUSS YOUR STRENGTHS.

3. FEEL FREE TO BRIEFLY ADD ANY COMMENTS YOU BELIEVE ARE PERTINENT TO THIS APPLICATION. (OPTIONAL)

CRIMINAL ACTIVITIES

THE DISTRICT HAS A DUTY TO TEACH STUDENTS PROPER CITIZENSHIP AND RESPECT FOR THE LAW, AND TEACHERS HAVE AN OBLIGATION TO SERVE AS ROLE MODELS FOR STUDENTS. BECAUSE THE DISTRICT TEACHES STUDENTS ABOUT THE DANGERS OF CHEMICAL ABUSE AND BECAUSE THE DISTRICT IS ENTRUSTED WITH THE SUPERVISION OF MINORS, THE DISTRICT CANNOT HAVE EMPLOYEES PERFORMING DUTIES WHILE UNDER THE INFLUENCE OF DANGEROUS SUBSTANCES OR SUBSTANCES WHICH ADVERSLY AFFECT REACTION TIME AND GOOD JUDGEMENT.

INFORMATION CONCERNING PAST ILLEGAL ACTS WILL BE CONSIDERED ALONG WITH THE TIME OF THE OFFENSE, THE SERIOUSNESS AND NATURE OF THE VIOLATION, ANY REHABILITATIONS AND YOUR SUBSEQUENT EMPLOYMENT HISTORY.

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES _____ NO _____

IF SO, PROVIDE DETAILS: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE INVOLING ILLEGAL DRUGS?

IF SO, PROVIDE DETAILS: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE INVOLVING MINORS?

IF SO, PROVIDE DETAILS: _____

DRIVING RECORD

THIS PORTION IS ONLY TO BE COMPLETED IF YOU ARE APPLYING FOR A POSITION THAT REQUIRES THE TEACHER TO TRANSPORT STUDENTS:

HAS YOUR DRIVERS LICENSE BEEN SUPENDED WITHIN THE LAST 5 YEARS?

YES _____ NO _____

HAVE YOU EVER BEEN CONVICTED OF DRIVING UNDER THE INFLUENCE OF DRUGS OR ALCOHOL?

YES _____ NO _____

IF SO, PROVIDE DETAILS: _____

IT IS THE POLICY OF THE STUART BOARD OF EDUCATION TO PROVIDE EQUAL OPPORTUNITY IN ALL ITS OPERATIONS AND IN ALL AREAS OF EMPLOYMENT PRACTICE AND TO ASSURE THAT THERE SHALL BE NO DISCRIMINATION AGAINST ANY EMPLOYEE OR APPLICANT ON THE GROUNDS OF AGE, RACE, RELIGION, SEX, COLOR, NATIONAL ORIGIN, ANCESTRY, OR HANDICAPPING CONDITIONS.

THIS APPLICATION WILL SERVE AS YOUR REQUEST TO ADD YOUR NAME TO OUR LIST OF APPLICANTS. THE ACCEPTANCE OF AN APPLICATION IS NOT A PROMISE OF EMPLOYMENT.

I UNDERSTAND THAT MY APPLICATION WILL REMAIN ACTIVE FOR ONE YEAR AFTER RECEIPT AND THAT I MUST NOTIFY THE SUPERINTENDENT'S OFFICE, IN WRITING, IF I DESIRE TO BE CONSIDERED BEYOND THAT PERIOD OF TIME.

SIGN BELOW IF YOU AGREE THAT THE DISTRICT MAY CONTACT YOUR PREVIOUS EMPLOYERS AND ASK THEM MORE DETAILED QUESTIONS ABOUT YOUR PRIOR WORK EXPERIENCE, IF YOU SPECIFICALLY CONSENT TO THE RELEASE OF INFORMATION BY THESE PRIOR EMPLOYERS TO THE DISTRICT, AND AGREE TO RELEASE SUCH PRIOR EMPLOYERS, THEIR EMPLOYEES, AND THEIR GOVERNING BOARDS, FROM ANY AND ALL CAUSES OF ACTION OR OTHER POTENTIAL CLAIMS WHICH YOU COULD HAVE AGAINST THEM FOR ANSWERING QUESTIONS ABOUT YOUR WORK EXPERIENCE. THIS CONSENT IS A COVENANT NOT TO SUE ANY PRIOR EMPLOYER, THEIR EMPLOYEES, OR THEIR BOARD MEMBERS FOR DEFAMATION, REGARDLESS OF WHAT SAID PRIOR EMPLOYERS MAY RELATE TO THE DISTRICT REGARDING YOUR PREVIOUS EMPLOYMENT EXPERIENCE.

I HAVE READ THIS CONSENT AND RELEASE OF ALL CLAIMS, AND IN CONSIDERATION OF BEING CONSIDERED AN APPLICANT FOR EMPLOYMENT AGREE TO ITS TERMS.

I DO HEREBY CERTIFY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL OF THE FACTS AND STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT GROUNDS FOR DISMISSAL.

INCLUDE WITH THIS APPLICATION A COPY OF TEACHING CERTIFICATES OR LICENSES AND A COPY OF ALL TRANSCRIPTS. FEEL FREE TO INCLUDE A RESUME.

SIGNATURE OF APPLICANT

DATE

SEND APPLICATIONS TO: STUART PUBLIC SCHOOL
8837 4TH STREET
STUART OK 74570