

# Certified Application for Employment



500 E Sunflower Blvd.  
Ozawkie KS 66070  
Phone: (785) 876-2214 / Fax: (785) 876-2383

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Name: \_\_\_\_\_

Title First Middle Last

Present Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Permanent Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Professional Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Email address: \_\_\_\_\_

*Please check the box next to the location(s) at which you prefer to be contacted.*

Position(s)/Level(s) for which you are applying (List in order of your preference)

<u>Position</u>	<u>Level of Instruction</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

The Northeast Kansas Education Service Center does not discriminate on the basis of sex, race, color, national origin, handicap or age in admission or access to, or treatment or employment in, its programs or activities.



## Personal Information

\_\_\_ YES \_\_\_ NO Have you ever been convicted of a felony or crime involving dishonesty or a crime with a juvenile as a victim?

If yes, was your certificate: \_\_\_ denied \_\_\_ suspended \_\_\_ revoked

\_\_\_ YES \_\_\_ NO Are you legally authorized to work in the United States of America?

## Education Data

School Attended

Dates

Degree

Major Field

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Number of semester hours in major field of study: Undergraduate: \_\_\_\_\_ Graduate: \_\_\_\_\_

Number of semester hours in minor field of study: Undergraduate: \_\_\_\_\_ Graduate: \_\_\_\_\_

Highest earned degree: \_\_\_\_\_ Date: \_\_\_\_\_ Semester hours beyond highest degree: \_\_\_\_\_

Years of full time teaching experience: \_\_\_\_\_ Have your credentials been sent? \_\_\_\_\_

Placement office where your credentials are on file: \_\_\_\_\_

## References

Please list names and addresses of two character references not listed in your credentials:

<u>Name</u>	<u>Address</u>	<u>Phone</u>
1. _____	_____	_____
2. _____	_____	_____

Please list names and addresses of your last three supervisors:

<u>Name</u>	<u>Address</u>	<u>Phone</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

## Additional Data

In your own handwriting, please use the space below to add anything not included elsewhere in your application materials or credentials which you feel will further support your candidacy:

## **Authorization and Release**

1. I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.
  
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
  
3. I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.
  
4. I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

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Signature of Applicant

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Date