

FIRTH SCHOOL DISTRICT #59

**APPLICATION
FOR
ADMINISTRATOR**

FIRTH SCHOOL DISTRICT #59
P.O. BOX 69

FIRTH, IDAHO 83236

Please submit this application form to the address printed at the bottom of the page. Since your application will be separated from other papers at some stages of the process, please complete in detail. Use supplemental sheets if needed.

You are invited to tell of achievements in a letter of application, and may attach selected supportive materials with your cover letter if you wish.

Please request that your college Placement files and personal resume be forwarded to the address below.

PERSONAL INFORMATION

Last Name	First	Middle
Present Position	Business Phone	Home Phone
Business Address	City	State Zip
Home Address	City	State Zip
Type of Organization or School District Presently Employed		
Enrollment	Employees	Budget (your unit)
Applicable Certification	State(s)	

PLEASE SUBMIT TO: FIRTH SCHOOL DISTRICT #59
P.O. BOX69
FIRTH, IDAHO 83236

PERSONAL DATA

Please provide any personal data which you think will be of assistance in evaluating your application.

CERTIFICATION

I hold a current Administrator's Certificate endorsed for the following:

IMPORTANT: The following questions must be answered. If the answer is Yes, use an extra sheet and explain fully.

- A. Have you ever had a diploma, credential or certification denied, revoked or suspended?
Yes ___ No ___
- B. Have you ever failed or refused to fulfill a contract of employment entered into by you with any school district?
Yes ___ No ___
- C. Have you ever been dismissed from any teaching or administrative position?
Yes ___ No ___
- D. Have you ever been convicted of a felony?
Yes ___ No ___

LEADERSHIP & COMMUNITY ACTIVITIES

ATTITUDES

- A. Briefly describe yourself as an administrator.
- B. Professional Organizations membership. How have you participated?
- C. What are the primary reasons for your interest in this position?

EMPLOYMENT HISTORY

(List your most recent experience first) Please supply all information requested.

The following is a complete list of all employment as an educator:

Yes__ No__

Name and Location of Schools	From Mo/Yr	To Mo/Yr	Position Held/ Duties Performed

(Please continue on a supplemental sheet if necessary)

Other Employment	Employer & Address	Dates

(Please continue on a supplemental sheet if necessary)

EDUCATION

(Include High School, College, University and Summer School)

Name & Place of Institution	Dates	Date of Grad	Total Hours	Major/ Minor	Degree/ Diploma

(Please continue on a supplemental sheet if necessary)

REFERENCES

Please list the names and addresses of four or more persons who know of your professional work and qualifications as a school administrator. May we contact these people now?

NAME	POSITION	ADDRESS	PHONE
1.			
2.			
3.			
4.			

I have requested my placement file be forwarded from

(Name of Institution)

I am currently under contract for the coming school year.

Yes ___ No ___

I will be able to indicate acceptance of a contract, if offered, by

(Date)

A personal interview will be required of all finalists prior to being employed.

I solemnly understand that: (1) Any contract issued is conditioned upon having an Idaho Administrator's Certificate with appropriate endorsement valid for the period of service covered by the contract and (2) Any false statement made in this application shall constitute sufficient grounds for voiding any contract issued at the discretion of the Board.

Signature _____ Date _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____ do hereby authorize School Districts, Institutions of Higher Learning and individuals employed by the same with knowledge of my professional and personal qualifications, to furnish to School District #59 any and all information regarding me in order that authorities of said district may determine my suitability for the position for which I have applied.

I authorize authorities of School District #59 to make inquiry of my present and past employers and/or professional associated regarding my character, integrity and reputation. Exceptions, if any, are:

Signature _____ Date _____