

# LIBERAL R-II SCHOOL DISTRICT

107 S. Payne  
Liberal, Missouri 64762  
(417) 843-5115

## APPLICATION FOR AN ADMINISTRATIVE POSITION

The Liberal R-II 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 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 nondiscrimination, you may contact the Superintendent of Schools at (417) 843-5115.

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

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_  
Last First Middle

**Other names that may appear on your transcript or records:**  
\_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
P.O. Box or Street City State Zip

**Telephone:** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### Position Desired

\_\_\_\_\_ 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice

**Areas of Certification:**

\_\_\_\_\_ Type of Certificate \_\_\_\_\_ Exp. Date \_\_\_\_\_  
\_\_\_\_\_ Type of Certificate \_\_\_\_\_ Exp. Date \_\_\_\_\_  
\_\_\_\_\_ Type of Certificate \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Present Position:** \_\_\_\_\_

**Current Salary:** \_\_\_\_\_

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes  No

Have you ever filed an application with us before? Yes  No

If yes, give date: \_\_\_\_\_

Have you ever been employed with us before? Yes  No

If yes, give date: \_\_\_\_\_

May we contact your present employer? Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes  No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? \_\_\_\_\_

Are you available to work: Full Time  Part Time   
Shift Work  Temporary

Are you currently on "lay-off" status and subject to recall? Yes  No

Can you travel if job requires it? Yes  No

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

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Other qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience:

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State any additional information you feel may be helpful for us in considering your application:

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**Educational Preparation:**

	Name & Location	Dates of Attendance	Names of Degree	Major	Hrs. Under Graduate	Hrs. Graduate	Overall GPA
<b>High School</b>		<b>N/A</b>	<b>N/A</b>	<b>N/A</b>			<b>N/A</b>
<b>Colleges/ Universities</b>							

**Teaching Experience:**

District Name & Location	Position	Dates of Employment	Reason for Leaving	Supervisor	Phone

**Administrative Experience:**

Employer Name & Location	Position	Dates of Employment	Reason For Leaving	Supervisor	Phone

On a separate sheet of paper, please respond to the following questions in your own handwriting.

1. Why did you decide to become an administrator and why are you seeking this position?
2. What student outcomes would you strive for as an administrator?
3. Write a brief autobiography focusing on the important people and events in your life.

**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 than \$100.00) Yes  No
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) Yes  No
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? Yes  No
4. Have you ever failed to be re-employed by an educational institution? Yes  No

If the answer to any of the foregoing questions is “yes”, please explain. Use a separate sheet if necessary:

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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 and 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 September 1<sup>st</sup>. I understand that if I wish my candidacy to remain open after that date, I must submit another application.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

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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 and level: \_\_\_\_\_

## NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification<sup>1</sup> that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.<sup>2</sup>

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.<sup>3</sup>

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

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<sup>1</sup> Written notification includes electronic notification, but excludes oral notification.

<sup>2</sup> See 28 CFR 50.12(b).

<sup>3</sup> See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).