

APPLICATION FOR LICENSED EMPLOYMENT

St. Paul School District #45
20449 Main Street NE
St. Paul, OR 97137
503-633-2541



Please check area(s) of interest:

- Elementary Grades: K 1 2 3 4 5 6
 Middle School: 7 8 Subjects: _____
 High School 9 10 11 12 Subjects: _____
 Special Education: Learning Specialist Speech/Language Specialist
 Media Specialist
 Physical Education Specialist
 Music Specialist: Vocal Orchestra Band
 Other areas of interest and/or specialist:
 Counselor Nurse Talented and Gifted
 Coaching ELL Specify Area: _____

Are you interested in working as a substitute? Yes No

APPLICATION & HIRING PROCEDURES

- You must submit and have on file the following:
 - ⇒ *Completed Application Form* ⇒ *Current Resume*
 - ⇒ *Letter of Application* ⇒ *Copy of your transcripts (may be unofficial)*
 - ⇒ *Copy of your Oregon Teaching License* ⇒ *Educational Philosophy*
 - ⇒ *3 Letters of Recommendation*
- Once your application is complete, your file will be made available for review and you may be called for an interview by the reviewing administrator.
- There will be an Interview Committee responsible for reviewing, interviewing and recommending your candidacy. The Interview Committee will make final selections and forward successful candidates to the School Board for hiring.
- If selected as the successful candidate, the applicant **MUST** submit a valid Oregon teaching license to the Administration **PRIOR** to beginning work in the position.

Please Read and Sign

The facts set forth on this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause for immediate dismissal. I hereby grant to the District or its agent permission to check civil or criminal records and to verify any statement made on this application or the completeness and accuracy thereof.

Signature of Applicant _____ **Date** _____

Discrimination in the St. Paul School District is prohibited. Recognizing its legal, as well as social obligation to make equal employment opportunity a reality, The St. Paul School District hires and promotes without regard to race, color, gender, national origin, religion, age or mental or physical disability or other legally protected status.

PERSONAL INFORMATION

Last Name First Name Middle Initial

Social Security # - - Email Address

Are you legally eligible for employment in the U.S.A.? _____ YES _____ NO

Have you ever used another name? If so, what name? _____

Current Telephone Number at which you can always
be reached or receive a message Contact Person

Present Address City State Zip

Permanent Address (if different) City State Zip

Are you currently under contract with another district? _____ YES _____ NO

If yes, name the district: _____ Position: _____

Your date of availability: _____

YES NO

1. Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct or alleged violation of professional standards of conduct or when you had reason to believe such investigation was imminent?
2. Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct?
3. Have you ever failed to complete a contract for education or school-related position, or for any alleged misconduct or alleged violation of professional standards of conduct, been placed on leave by your employer or left such employment prior to the end of the contract term?
4. Have you ever had a professional certificate, credential or license (of any kind) revoked or suspended or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct?
5. Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?
6. Have you ever surrendered a professional license of any kind before its expiration?
7. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to, educational licensure?
8. Have you ever been convicted or been granted conditional discharge by any court for: (a) any felony, (b) misdemeanor, (c) any major traffic violation, such as; driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended, revoked or used in violation of any license restrictions; or failure to perform duties of a driver or witness at an accident.
9. Have you ever been arrested or cited for any offense listed in question (8) above which is still pending in court?
10. Have you ever entered a plea of Guilty or No Contest relative to any charges for an offense listed in question (8)?
11. Have you ever had any civil judgment or other court order entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking or other threatening behavior toward other persons?

If you have answered "yes" to any question, please provide a full, written explanation on a separate piece of paper.

LICENSURE

Do you hold a current Oregon License? Yes No Date of Expiration: _____

If yes: Basic/Initial Standard/Continuing
 Administrative ES MS/ML HS Other (specify): _____

Endorsement Areas: _____

If no: Have you applied for an Oregon License? Yes No

When do you expect to receive or be eligible for an Oregon License? _____

Please indicate the date of your application and the type of license you have requested. _____

SPECIAL TRAINING

Are you fluent in a foreign or second language (other than English)? Yes No

If yes, what language(s)? _____

Have you received training or preparation in a foreign or second language, although not fluent? Yes No

If yes, what language(s)? _____

Have you received specific preparation for middle school teaching? Yes No

If yes, briefly describe: _____

If you are applying for elementary or middle school positions, in which areas or subjects (if any) do you have extended preparation and/or are qualified to teach and/or have endorsements?

List assignments as a coach or activities advisor for which you are qualified.

PROFESSIONAL & COMMUNITY ACTIVITIES/HONORS

List professional and/or community affiliations. Include offices held, awards received, etc.

ORGANIZATION	NAME/ADDRESS	DATES	POSITION/DUTIES/AWARDS

EDUCATIONAL TRAINING

The following information serves as a preliminary basis for determining salary and must be completed accurately.

	Name of School	Location	Dates Inclusive	Degrees Rec'd	Major	Minor	Scholarship Avg.	
High School								List # of upper division quarter hours beyond the B.A.
Undergraduate College or University								
Post Graduate College Work								

TEACHING EXPERIENCE

List most recent experience first. Include only those experiences for which a teaching license was required. Please do not include substitute experience. Other job related experiences should be listed on your resume.

Dates From To	District/Location	Name of School	No. of Years	Subjects & Grades Taught	Full Time	Part Time	Reasons for Leaving
Total							

STUDENT TEACHING EXPERIENCE: If your only teaching experience to date has been student teaching, please describe on line below.

REFERENCES

Give three references including superintendents and principals who have first-hand knowledge of your character, personality, scholarship and teaching ability.

Name	City/State	Phone Number	Official Position

OPTIONAL AFFIRMATIVE ACTION INFO

This information may be detached and mailed in independently.

This information is to insure equal opportunity under an affirmative action program. To assist in this program, please provide the following information:

- Race/cultural group: Native American Black White Asian Hispanic Other: _____
- Sex: Female Male
- Date of Birth: _____ Date of Application: _____

