

Highmore Harrold School District #34-2
 415 Iowa Ave South-PO Box 416
 Highmore, SD 57345
 Phone: (605) 852-2275
 Fax: (605) 852-2295

FOR OFFICE USE ONLY	
Received by: _____	
Date: _____	
Delivered in person: <input type="checkbox"/>	
Received by: <input type="checkbox"/> mail <input type="checkbox"/> fax <input type="checkbox"/> email	

TEACHER APPLICATION FORM

Applicant must submit the following information: Letter of Application, College transcript, Personal Resume, College Credentials and Letters of Recommendation from recent employers. Applications will not be considered until all of the above information is received. Additional information may be submitted.

POSITION(S) APPLYING FOR: Administration Teacher Other certified position _____

PERSONAL DATA:

Name: _____
Last First Middle Social Security Number

Address: _____
Street City State Zip

Phone: _____
Home Work Cell Phone

SOUTH DAKOTA TEACHER CERTIFICATE# _____ EXPIRATION DATE: _____
 (Please submit a copy of your South Dakota teaching certificate, if available)

Are you a U.S. citizen or otherwise legally authorized to work in the U.S.? Yes No
 (proof of citizenship or immigration status will be required upon employment)

Have you ever been convicted of a felony or misdemeanor? Yes No
 (Do not include minor traffic violations unless alcohol related)

(A "Yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying is also considered)

If yes, Date(s): _____
 Offense(s): _____

Have you ever been dismissed from a position, non-renewed, or asked to resign? Yes No
 If yes, please explain: _____

Complete the following if you are applying for a position that requires operating a motor vehicle:

Driver's License Number: _____ State: _____ Expiration Date: _____

Are you currently under contract to another school district or educational institution? Yes No
 If yes, where? _____ Contract expiration date: _____

List activities you are competent and willing to direct or coach: _____

EDUCATION:

	Name, City and State	Majors/Minors	From/To	Degree or # of Credit Hours
High School or GED				
Undergraduate				
Undergraduate				
Graduate				

Number of Graduate semester hours earned **beyond** highest degree: _____

Please list any completed seminars or training related to your ability to perform the job for which you are applying:

TEACHING EXPERIENCE:

School Name: _____ No. year(s) teaching experience: _____

Address: _____
Street City State Zip

Grades & Subjects: _____

Full-time Part-time

Dates Employed (M/D/Y) From: _____ To: _____

Supervisor's Name: _____ Phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

School Name: _____ No. year(s) teaching experience: _____

Address: _____
Street City State Zip

Grades & Subjects: _____

Full-time Part-time

Dates Employed (M/D/Y) From: _____ To: _____

Supervisor's Name: _____ Phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

School Name: _____ No. year(s) teaching experience: _____

Address: _____
Street City State Zip

Grades & Subjects: _____

Full-time Part-time

Dates Employed (M/D/Y) From: _____ To: _____

Supervisor's Name: _____ Phone: _____

Reason for leaving: _____

May we contact this employer? Yes No

OTHER WORK EXPERIENCE:

Company Name: _____

Address: _____
Street City State Zip

Job Title: _____ No. Employees Supervised: _____

Dates Employed (M/D/Y) From: _____ To: _____

Supervisor's name: _____ Phone: _____

Duties: _____

May we contact this employer? Yes No Hours per week: _____ Final Salary/Rate: \$ _____

Reason for leaving: _____

Company Name: _____

Address: _____
Street City State Zip

Job Title: _____ No. Employees Supervised: _____

Dates Employed (M/D/Y) From: _____ To: _____

Supervisor's name: _____ Phone: _____

Duties: _____

May we contact this employer? Yes No Hours per week: _____ Final Salary/Rate: \$ _____

Reason for leaving: _____

REFERENCES:

(REFERENCES SHOULD BE FAMILIAR WITH YOUR PROFESSIONAL WORK, INCLUDE ADMINISTRATORS WHO SUPERVISED YOU)

Name: _____ Occupation: _____ Phone: _____

Name: _____ Occupation: _____ Phone: _____

Name: _____ Occupation: _____ Phone: _____

Name: _____ Occupation: _____ Phone: _____

PREEMPLOYMENT STATEMENT

(Please read carefully and sign the statement below.)

I understand and agree that:

* The information that I have provided on this application is true and complete. Any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification of refusal of employment, or, if employed, termination from Highmore-Harrold School District's employ.

* Any offer of employment I may receive from Highmore-Harrold School District is contingent upon my successful completion of a criminal background investigation (SDCL 13-10-12) and a completed school employee certification of health (SDCL 13-43-3), as required by the State of South Dakota.

* I authorize the Highmore-Harrold School District to make any investigation of any personal, educational, vocational, or employment history. I further authorize any current or former employer, person, firm, corporation, educational, or vocational institution or government agency to provide the Highmore-Harrold School District with information they have regarding me. I hereby release and discharge the Highmore-Harrold School District and those who provide information from any and all liability as a result of furnishing and receiving this information.

* In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of the District.

Signature

Date

The Highmore-Harrold School District #34-2 does not discriminate on the basis of race, color, marital status, national origin, sex, disability, age, veteran's status or religion in admission or access to or treatment or employment in its programs and activities.

APPLICANT QUESTIONS:

(submit a brief summary on a separate sheet of paper for the following questions if needed)

1. What qualities and abilities do you possess which qualify you for the position you are seeking with our school district?
2. Give an example of a specific problem you have solved and the process used.
3. How do you provide for individual differences in students?
4. How would you assist in advancing technology in the school program?
5. What do you consider to be five most critical attributes of successful educators or administrators?