



MCLOUTH UNIFIED SCHOOL DISTRICT #342

PO Box 40, 217 Summit, McLouth, KS 66054
913-796-2201

Building Principal Application

USD 342 Mission Statement

*Together, we learn in a community that promotes
academic excellence, respect, life-long learning, and responsible citizenship.*

Name _____
Last First Middle

Address _____
Street City State Zip

Telephone: Home _____ Work _____ Cell _____

Email address (optional) _____

Position applied for _____ Date Available _____

CERTIFICATION

Kansas Certification: Yes _____ No _____

Date Issued: _____

Date Expires: _____

Level: _____ Subject: _____

Level: _____ Subject: _____

Other Certification: _____

State(s): _____

Level: _____ Subject: _____

Level: _____ Subject: _____

EDUCATIONAL RECORD

| Degree (BS,BA, MA, MS, PHD, etc) | Name/Location of Institution | Number of Years Attended | Date Conferred | Major Field |
|--|------------------------------|--------------------------------|-------------------|-------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

PROFESSIONAL WORK EXPERIENCE

Essential: List correct names, addresses, and phone numbers. Begin with your latest employment.

| Present Employer | Dates | Describe The Work Your Performed |
|------------------------|-------|----------------------------------|
| Company: | From: | |
| Address: | | |
| City/St/Zip: | | |
| Phone: | To: | |
| Name of Supervisor(s): | | |
| Reason for Leaving: | | |

| Previous Employer | Dates | Describe The Work Your Performed |
|------------------------|-------|----------------------------------|
| Company: | From: | |
| Address: | | |
| City/St/Zip: | | |
| Phone: | To: | |
| Name of Supervisor(s): | | |
| Reason for Leaving: | | |

| Previous Employer | Dates | Describe The Work Your Performed |
|------------------------|-------|----------------------------------|
| Company: | From: | |
| Address: | | |
| City/St/Zip: | | |
| Phone: | To: | |
| Name of Supervisor(s): | | |
| Reason for Leaving: | | |

PROFESSIONAL REFERENCES:

Name: _____ Position _____

Address: _____ Phone: _____

Name: _____ Position _____

Address: _____ Phone: _____

Name: _____ Position _____

Address: _____ Phone: _____

PROFESSIONAL OPINION

1. List the top three priorities or responsibilities (in order) relative to the position of a building principal?
2. What is the purpose of teacher evaluation process?
3. How can you as a building administrator, contribute to the success of a classroom teacher?
4. Please describe the strengths that you have to offer for the position in which you are applying?

Do you have any circumstances that may affect your ability to perform your duties as a classroom teacher?

Yes _____ No _____

Have you ever been dismissed or asked to resign from employment? Yes _____ No _____ If yes, please explain: _____

Have you ever entered into a criminal diversion agreement? Yes _____ No _____

Have you ever been convicted of a crime involving moral turpitude? Yes _____ No _____

Have you ever been convicted of a felony or crime involving dishonesty, a controlled substance or a child?

Yes _____ No _____

Have you been convicted of a felony within the last 7 years? Yes _____ No _____ If yes, please explain: _____

Have you ever had a certificate revoked in any state(s)? Yes _____ No _____ What State: _____

Have you ever been denied a certificate in any state(s)? Yes _____ No _____ What State: _____

Have you ever had a certificate suspended in any state(s)? Yes _____ No _____ What State: _____

Have you lived in Kansas for less than 10 consecutive years? Yes _____ No _____ If yes, please explain _____

Are you a citizen of the United State? Yes _____ No _____ If no, please answer the following question.

Are you an alien authorized to work in the United States? Yes _____ No _____

(Proof of citizenship or immigration status will be required upon employment)

Agreement

- I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the District which reserve the right to accept or reject it. I further agree to observe all rules, regulations and policies of the District now in force and effect or as they may change during my employment, if I am employed by the District.
- I hereby authorize the District to conduct work history, personal reference, or police record inquiries to determine my acceptability for employment.

Signature: _____ Date: _____

NOTICE OF NON-DISCRIMINATION

Applicants for admission and employment, students, parents of elementary and secondary school students, employees, sources of referral of applicants for admission and employment, and all unions or professional organizations holding collective bargaining or professional agreements with USD 342 are hereby notified that this institution does not discriminate on the basis of race, color, national origin, gender, age, religion, marital status, gender orientation, veteran status, handicap or any other legally protected status in admission or access to, or treatment or employment in, its programs and activities. Any person having inquiries concerning USD 342 compliance with the regulations implementing Title VI, Title IX, or Section 504 is directed to contact USD 342, 217 Summit, and (913)796-2201, the Central Office to coordinate the institution's efforts to comply with the regulations implementing Title VI, Title IX, and Section 504. Any person may also contact the Asst. Secretary for Civil Rights, U.S. Department of Education, regarding the institution's compliance with the regulations implementing Title V), Title IX, or Section 504.