#  Name:

 **First** **MI** **Last** **Email**

**Address:**

#  *Street Address City State Zip Code*

**Telephone:** **Home:**       **Office:**       **Cell:**

**Current Position:**       **District:**       **Type of District:** **K-8** [ ]  **K-12** [ ]

**District Enrollment:**       **Building Enrollment:**       **Present Salary:**

**District Budget:**       **Building Budget:**       **District Staff:**       **Building Staff:**

Are you currently certified as a Superintendent in Missouri? Yes: [ ]  (expiration date      ) No: [ ]

**OR,** Are you eligible to be certified as a Superintendent in Missouri? Yes: [ ]  No: [ ]

Are you presently certified as a Superintendent in another state? Yes: [ ]  (Where      ) No:[ ]

What is your employment contract status for 2023-2024 and beyond?

# Educational Preparation - Beginning with Bachelor's Degree

|  |  |  |  |
| --- | --- | --- | --- |
| **DEGREE** | **YEAR EARNED** | **COLLEGE/UNIVERSITY** | **CITY/STATE** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

Educational Experiences to Date (include current assignment).

May a contact be made with your present employer? [ ]  Yes [ ]  No

|  |  |  |  |
| --- | --- | --- | --- |
| **FROM/TO** | **POSITION** | **INSTITUTION/LOCATION** | **ENROLLMENT** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

REFERENCES:

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME/POSITION** | **RELATIONSHIP TO APPLICANT** | **ADDRESS** | **PHONE NUMBERS****(List Work & Home/Cell)** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**BACKGROUND**:

|  |  |  |
| --- | --- | --- |
| Have you ever been arrested for any violation other than minor traffic violations? | Yes [ ]  | No [ ]  |
| Have you ever been disciplined, discharged, or asked to resign from a prior position?  | Yes [ ]  | No [ ]  |
| Have you ever resigned from a prior position after a complaint had been received against you or your conduct was under investigation or review? | Yes [ ]  | No [ ]  |
| Has your contract in a prior position ever been non-renewed?  | Yes [ ]  | No [ ]   |
| Have you ever not been nominated for re-employment in a prior position or ever had your nomination for re-employment not be approved? | Yes [ ]  | No [ ]  |
| Have you ever been charged with or investigated for sexual abuse or harassment of another person? | Yes [ ]  | No [ ]  |
| Have you ever entered a plea of guilty or "no contest" (nolo contendere) to any crime (other than a minor traffic offense)?  | Yes [ ]  | No [ ]   |
| Have you ever had a professional license or certificate suspended or revoked in any state, or have you ever voluntarily surrendered, temporarily or permanently, a professional license or certificate in any state?  | Yes [ ]  | No [ ]  |
| Has any court ever deferred, filed or dismissed proceedings without a finding of guilty and required that you pay a fine, penalty or court costs and/or imposed a requirement as to your behavior or conduct or a period of time in connection with any crime (other than a minor traffic offense)?  | Yes [ ]  | No [ ]  |

If you have answered YES to any of the previous questions, provide full details on an additional sheet including, with respect to court actions, the date, offense in question, and the address of the court involved. Convictions or other disposition of a crime is not necessarily an automatic bar to employment. **The Scott City R-I Board of Education reserves the right to conduct a criminal background check on any and all applicants.**

APPLICATION PROCEDURE

**Search being conducted by Missouri Association of Rural Education (MARE)**

Applicants are advised to email initially and then mail a hard copy of all application materials to ***Scott City R-I Superintendent Search***, Mr. Darryl Pannier, Search Consultant. Direct all questions to: Mr. Darryl Pannier, Search Consultant, Phone: (573) 803-9008; Fax: (660) 747-8160; Email: [**darrylpannier@yahoo.com**](file:///C%3A%5CUsers%5CKevin%20Sandlin%5CDesktop%5CSpring%20Bluff%20R-XV%20Search%5Cdarrylpannier%40yahoo.com)**.**

Applicants are asked not to make direct contact with the board of education members. Initial applications will be kept confidential; however, all applications, letters of reference, resumes, transcripts, credentials, etc., for the purpose of this application process will, upon receipt, become the sole property of the **Scott City R-I Board of Education**, and shall remain their property indefinitely.

Please include:

* Completed application form and current resume with three letters of reference.
* Cover letter directed to the **Scott City R-I Board of Education**. (Include reasons for interest in the position and a description of significant accomplishments over the past five years).
* Evidence of Missouri Superintendent’s Certification or eligibility thereof, (copy of certificate).
* Current transcript(s).
* Any other supporting documents that would enhance the application file.
* Selected finalist will provide a copy of their most recent background check in conjunction with contract signing.

Forward credential file to ***Scott City R-I Superintendent Search*** Attn: Mr. Darryl Pannier, Search Consultant, 2249 Kent Drive, Cape Girardeau, Missouri, 63701.

|  |
| --- |
| ***STATEMENT OF NON-DISCRIMINATION*** *- The* ***Scott City R-I School District*** *does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to Boy Scouts and other designated youth groups. The following individual has been designated to coordinate the district’s efforts to comply with Section 504, Title II, the Age Act, and Title IX: Ms. Marcia Daniels, Scott City R-I School District, 3000 Main Street, Scott City, Missouri, 63780. Phone number: (573) 264-2131. For further information on notice of non-discrimination, visit* [***http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm***](http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm) *for the address and phone number of the office that serves your area, or call 1-800-421-3481.* |

I understand that information submitted in and with this application may be disclosed to a screening and/or interviewing committee, which may include board members, administrators, other staff, and members of the community. I give my consent to this disclosure. I authorize investigation of all statements in this application and certify that all information included is complete and accurate.

|  |  |  |
| --- | --- | --- |
|       |  |       |
| Signature |  | Date |