

USD #505 Chetopa - St. Paul

“Making a Difference, Changing Children’s Lives, Sharing the Wonders of the World”

Central Office and Chetopa Campus:

430 Elm Street
Chetopa, KS 67336
Ph: 620.236.7244
FAX: 620.236.4271
E-mail: bwilliams@usd505.org

St. Paul Campus:

1st & Washington
St. Paul, KS 66771
Ph: 620.449.2245
FAX: 620.449.8960
E-mail: bwilliams@usd505.org

Our mission: to provide an environment which offers every student the opportunity to receive a meaningful education.

USD #505 is an equal employment and educational opportunity agency.

Application Instructions for Certified Employment

Today’s Date: _____ E-mail Address: _____

Full Legal Name: _____

Permanent Address: (Street) _____ (City) _____ (State/Zip) _____

Phone Number: (Home) _____ (Work) _____ (Cell) _____

Social Security Number: _____

Driver’s License Number: _____

Position Applied For: _____

If you are related to anyone in our employment or who serves as a board of education member, please indicate that person and his/her position: _____

Please provide the following information (to be delivered in one package) to the central office:

- This completed application
- A letter of application
- All college transcripts (copies are acceptable)
- All college credentials
- A copy of your Kansas teaching license
- A current resume
- A minimum of three references with complete contact information
- Any other information which you feel would be beneficial

Job Application Acknowledgments

- I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.

- I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.

- I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.

- I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation and I release you from all liability for any damages that may result from your doing so.

Signature of applicant

Date

- **Moral turpitude** is an act of baseness, vileness, or depravity in the private and social duties which a person owes another member of society or society in general and which is contrary to the accepted rule of right and duty between person, including, but not limited to theft, attempted theft, murder, rape, swindling, and indecency with a minor. Have you ever been convicted of or pled guilty or *nolo contendere* to a felony or any offense involving moral turpitude?

_____ YES

_____ NO

If yes, please explain: _____

Residency History

List (in reverse chronology) your residence address(-es) for the past ten years:

Address (Street Address, PO Box, Town, State, Zip)	From...	To...