

Application For Employment



Caldwell USD 360
22 N. Webb
Caldwell, KS 67022
620-845-2585-Phone
620-845-2610-Fax

1. Personal Information

DATE _____

NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

PHONE NUMBER (_____) - _____ - _____

2. Employment Desired

Position 1 _____

Position 2 _____

Do you hold a valid Kansas Teaching Certificate? _____

If Yes, Date Issued _____ Expiration Date _____

If No, What is status? _____ ASEP certification? _____

For ASEP certification, date issued _____ Supervised or Unsupervised

3. Educational & Professional Training

School	Location	Degree	Dates Attended
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. References

Name	Address	Position	Telephone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. General Information

Please provide in your own words a statement indicating your desire to teach in USD 360. Include information on your experiences in the classroom and specific ideas or innovations you feel are important in the field of education today. Include a summary of your philosophy on education and classroom management.

6. Activity Sponsor or Coaching Interest

Please provide in your own words a statement indicating your desire to coach or sponsor any activity in our school. Include any background you have had in an activity and experience you have had at sponsoring or coaching. If you feel you have any ideas to make changes in an activity include those as well.