

# Success Through Rigor, Relevance and High Expectations!

## CERTIFIED PERSONNEL APPLICATION

Diamond R-IV Schools

401 N. Main

PO Box 68

Diamond, MO 64840

(417) 325-5186

[www.diamondwildcats.org](http://www.diamondwildcats.org)



*An equal opportunity employer- The School District of Diamond does not discriminate on the basis of race, gender, religion, age, national origin, or disability.*

**IMPORTANT:** Before consideration for employment, the candidate must have the following on file with Central Office.

1. Letter of Application
2. Completed application form
3. Copies of college/university transcripts
4. Copy of Missouri teaching certificate(s) or copy of teaching certificate from another state
5. A passport or two other pieces of identification, such as, a driver's license or school picture I.D. and a Social Security card.

**\*Please staple or clip materials together, please do not place materials in folders or binders\***

### APPLICANT INFORMATION

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LAST	FIRST	MIDDLE
Present Address _____		Phone _____
_____		Alternate Phone _____
City	State	Zip
Social Security Number _____		

APPLYING FOR THE POSITION OF:

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(INDICATE SUBJECTS IN ORDER OF PREFERENCE)

At the \_\_\_\_\_ level.  
(INDICATE ELEMENTARY, MIDDLE SCHOOL OR HIGH SCHOOL)

Today's Date \_\_\_\_\_ 20 \_\_\_\_\_

**PERSONAL DATA**

Do you hold a valid teaching certificate in Missouri? Yes\_\_\_\_\_ No\_\_\_\_\_

If not, have you applied for a teaching certificate in the State of Missouri? Yes\_\_\_\_ No\_\_\_\_

Date applied: \_\_\_\_\_

What subject area(s) are you certified in? \_\_\_\_\_

Do you have a valid sub certificate form Missouri? Yes\_\_\_\_\_ No\_\_\_\_\_

If not, have you applied for certification in the State of Missouri? Yes\_\_\_\_\_ No\_\_\_\_\_

Date applied: \_\_\_\_\_

**REFERENCES:**

These should be persons qualified to answer questions concerning your ability to work with Young people. Include those who have first-hand knowledge of your character, personality, scholarship and work habits.

<b>NAME</b>	<b>ADDRESS</b>	<b>PHONE#</b>	<b>POSITION</b>
<b>1.</b>			
<b>2.</b>			
<b>3.</b>			
<b>4.</b>			

**EDUCATION:**

<b>NAME OF INSTITUTION</b>	<b>DATES INCLUSIVE</b>	<b>DEGREE OR DIPLOMA</b>	<b>MAJOR</b>	<b>MINOR</b>

## EXPERIENCE

BEGIN WITH MOST RECENT EXPERIENCE. INCLUDE ALL JOBS FOR LAST FIVE (5) YEARS. ALSO, INCLUDE NON  
PAYING EXPERIENCE OF WORKING WITH CHILDREN OR YOUNG PEOPLE.

EMPLOYER NAME AND LOCATION	DATES	POSITION AND MAJOR DUTIES	REASON FOR LEAVING	FINAL ANNUAL SALARY

Are there any activities you have been involved in, or honors you have received that you would like for us to be aware of?

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If you respond "Yes" to any of the questions below, please explain on a separate sheet.

Yes  No Have you ever had a teaching certificate revoked or suspended?

Yes  No Have you ever been arrested for, **charged with**, or convicted of a felony or misdemeanor?

Yes  No Have you ever plead guilty or nolo contendere (no contest) to a felony or misdemeanor?

Yes  No Has the Missouri Department of Family Services, or similar agency in any other State of Jurisdiction, ever issued a determination or finding of cause or reason to believe or suspect that you have engaged in a physical, emotional, psychological, or sexual abuse or neglect of a child?

**PRE-EMPLOYMENT STATEMENT (OR NOTIFICATION AND AGREEMENT)  
PLEASE READ BEFORE SIGNING**

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.

**I agree to a fingerprint background check and understand that employment is considered probationary until satisfactory results of the background checks by the Missouri Highway Patrol and FBI have been received by Diamond Schools.**

If hired, I agree to abide by all of the organization's rules and regulations. I understand that the organization and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance, or otherwise change all policies, procedures, benefits or other terms or conditions of employment.

By signing this application, I declare that the information provided by me is complete and true to the best of my knowledge. I understand that any falsification, misrepresentation or omission on this application or during the interview process may be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

Questions regarding this section should be directed to any employment interviewer before signing.

The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

I acknowledge that I have read and understand the above statement.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_