

**Wheatland Schools - Unified School District 292**

**PO Box 165 – 2920 K 23**

**Grainfield, KS 67737**

**785-673-4213 - 785-673-4234 (fax)**



**Application for Employment  
Certified Teacher**

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
Last First Middle

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip Code Telephone

PERMANENT ADDRESS \_\_\_\_\_  
Street City State Zip Code Telephone

E-MAIL ADDRESS \_\_\_\_\_

Provide name of person best able to locate you when necessary.

\_\_\_\_\_  
Name Address Telephone

**EMPLOYMENT PREFERENCE**

TYPE OF APPLICATION: Elementary \_\_\_\_\_ Secondary \_\_\_\_\_ Both \_\_\_\_\_  
Administrative \_\_\_\_\_ Other \_\_\_\_\_

Please list in order of preference the positions for which you are qualified:

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_ 4. \_\_\_\_\_

**FOR OFFICE USE ONLY**

**AN EQUAL OPPORTUNITY EMPLOYER**

This District does not discriminate against any otherwise qualified applicant, employee or student on the basis of handicap, age, race creed, national origin, marital status or sex, except insofar as the actual nature of an assignment or program shall inherently involve requirements based upon sex.

**EDUCATIONAL AND PROFESSIONAL TRAINING**

<b>School</b>	<b>Name and Location of Institution</b>	<b>Date(s)</b>	<b>Degree</b>
<u>High School</u>	_____	_____	_____
<u>College or University</u>	_____	_____	_____
<u>College or University</u>	_____	_____	_____
<u>College or University</u>	_____	_____	_____
<u>College Credit Earned since last degree</u>	_____	_____	_____
Major in Undergraduate Work _____	No. of Semester Hours _____	GPA _____	
Minor in Undergraduate Work _____	No. of Semester Hours _____	GPA _____	
Major in Graduate Work _____	No. of Semester Hours _____	GPA _____	
Total Undergraduate Semester Hours _____		GPA _____	
Total Graduate Hours _____		GPA _____	

**EDUCATIONAL EXPERIENCE**

<b>Name of School – Address</b>	<b>Inclusive Dates</b>	<b>Grades or subject Taught</b>	<b>Extra Curricular Activities</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
Name and address of present or last superintendent or board president _____			
_____			

**OTHER EXPERIENCE**

Firm or Employer	Address	Kind of Work	Dates of Employment

**CERTIFICATE ENDORSEMENTS**

Type of Kansas Endorsement(s) held.

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_ 4. \_\_\_\_\_

**EXTRA CURRICULAR ACTIVITIES**

List extra curricular activities you are qualified and willing to direct or coach.

- 1. \_\_\_\_\_ 2. \_\_\_\_\_
- 3. \_\_\_\_\_ 4. \_\_\_\_\_

**REFERENCES**

List below at least three references including administrative and supervisory personnel who have first hand knowledge of your performance and or future potential in the area for which you are applying (vocational education applicants should list one business reference).

NAME	POSITION	ADDRESS (Street, City, State, Zip Code)	PHONE NUMBER

In the space provided below in your own handwriting, indicate your personal and professional goals in seeking a position in this district.

