CLASSIFIED EMPLOYMENT APPLICATION



Previous Last Name(s)_____

Dent-Phelps R-III School District

27870 Highway C Salem, MO 65560 573-729-4680

Fax: 573-729-8644

Website: www.dentphelps.k12.mo.us email: admin@dentphelps.k12.mo.us

Date of Application

Social Security Number: _____

Date Available:

PRINT CLEARLY OR USE TYPEWRITER. Answer all questions completely. This application is part of the review procedure. Incomplete information will affect the evaluation of your application. No question on this application should be answered in such a manner as to disclose race, color, creed, national origin, ancestry, age, marital status, sex, or the existence of any physical or mental condition unrelated to the performance of the position for which you are applying.

Residence Address			Will accept:	Full-time	Part-time	Substitute	
City/State/Zip							
Telephone: Home ()Area Code		The district does not discriminate on the basis of age, race, color, national origin, religion, gender, or disability in its employment practices.					
List languages you fluently: Speak_	Re	ead	Write				
	EMPLOYM	IENT D	ESIRED				
OFFICE IINST	FRUCTIONAL ASSISTANT		TRANSPORT	TATION			
Clerical Secretary	Regular Classroom Library Computer Lab		Bus Drive	er* (Write Approp	oriate Class Lice	nse # Below)	
·	Accounting Special Education – To One Student Special Education – Resource Special Education – Self-Contained Class		Bus Mechanic				
SEI Paraprofessional ADDITIONAL SERVICES			*The law requires bus drivers to be at least 21 years of age.				
Certified School Nurse Custodian Computer Technician Groundskeeper Home-School Liaison Cafeteria Other Other			OTHER:				
	DEFE	PENC	FS				
REFERENCES List three references, other than relatives, who have knowledge of your work experience and abilities. At least one should be a previous Employer or Supervisor.							
Name	Title		Address			Phone	

Name

Mailing Address

EDUCATIONAL AND PROFESSIONAL TRAINING									
Circle Last Year Completed		Trade or High School Technical, Business School, College 9 10 11 12 GED 1 2 3 4 5			llege	Graduate School 1 2 3 4			
High School Name		Location Did you graduate? Yes No							
List every Business, Trade School or College Attended Location			Dates Attended: Course Taken/ Date From To Major/Minor Graduated		Degree/ Certificate				
			SKILLS						
Circle any skill in which you have had training and/or experience									
1. Audio-Visual13. Food Services25. Printer2. Auto/Truck Mechanic14. Grounds Keeping26. Purchasing/Buyer3. Bookkeeping/Accounting15. Heavy Equipment Operator27. Refrigeration Repair4. Bus/Truck Driver16. Locksmith28. Secretary5. Carpenter/Woodworking17. Mechanical Work29. Sheet Metal6. Clerk/Typist18. Nursing/EMT30. Warehouse/Receiving7. Computer/Word Processing19. Office Machine Repair31. Welding8. Concrete/Blockwork20. Painting32. Other9. Courier/Delivery21. Payroll33. Other10. Custodial22. PBX/Receptionist34. Other11. Data Processing23. Plumbing12. Electrical Work24. Painter									

List present or mos recent employer firs	t voiti	WORK EXPERIENCE Attach additional page if necessary		
DATES EMPLOYED From To	EMPLOYER'S NAME (Include phone number)	SUPERVISOR'S NAME	REASON FOR LEAVING	POSITION TITLE

CONVICTION REPORT

Because of the tremendous responsibility Dent-Phelps R-III School District has to its school children and community, the following information is needed from all applicants and employees regarding convictions. *A record of conviction does not prohibit employment; however, failure to complete this form accurately and completely may mean disqualification from consideration for employment or may be cause for dismissal if employed and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time they initially completed this form. Questions regarding this information should be directed to the Superintendent or Personnel designee. Please read carefully and answer ALL Questions.

Questions	regarding this information sh	nould be directed to the Superinte	ndent or Personnel designee. P	Please read carefully and answe	r ALL Questions.				
Please pri	nt clearly.								
Name	Last		First	Middle					
	Lasi		FIISL	Mildule					
	Other names used (maide	n)							
	Social Security Number								
	Have you ever been convi	cted of a minor offense other than	n a minor traffic violation(s)? (c	circle) Yes	No				
	Have you ever been convi	cted of a felony?		Yes	No				
	Have you ever been convi	cted of a sex or drug related offer	nse?	Yes	No				
	Have you ever been convi	cted of a dangerous crime agains	st children?**	Yes	No				
	If any of the above questions are circled "Yes," fill in the information below and attach a letter of explanation.								
			TION INFORMATION except MINOR traffic violations)	N					
1. CONVIC	CTION / CHARGE		DATE OF CONVICTION	COURT OF CONVICTION					
CITY		STATE	AMOUNT OF FINE	LENGTH OF JAIL TERM					
REMARKS			LENGTH AND TERMS OF PROBATION						
2. CONVIC	TION / CHARGE		DATE OF CONVICTION	COURT OF CONVICTION					
CITY		STATE	AMOUNT OF FINE	LENGTH OF JAIL TERM					
REMARKS			LENGTH AND TERMS OF PROB	BATION					

*CONVICTION means the final judgment on a verdict or a finding of guilty, a plea of guilty, or a plea of nolo contendre, in any state or federal court of competent jurisdiction in a criminal case, regardless of whether an appeal is pending or could be taken. Conviction does not include a final judgment that has been expunged by pardon, reversed, set aside or otherwise rendered invalid.

^{**}Missouri law requires applicant to give notice of any conviction for dangerous crimes against children. These crimes are defined as second degree murder, aggravated assault, sexual assault, molestation of a child, sexual conduct with a minor, commercial sexual exploitation of a minor, sexual exploitation of a minor, child abuse, kidnapping and sexual abuse.

GENERAL EMPLOYMEN	NT INFORMA		additional sheet if explain any question.
Are you legally eligible to work in the United States? (circle)	Yes	No	
Do you have authorization to begin working immediately? (circle)	Yes	No	
3. Have you ever been dismissed from a position? (circle)	Yes	No	
If yes, explain			
Have you ever been asked to resign from a position? (circle)	Yes	No	
If yes, explain			
5. If currently employed, may we contact your present employer? (circle)	Yes	No	
6. Have you ever been employed by the Dent-Phelps R-III School district?	If so, when?		
READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE.			
material facts will cause forfeiture on my part of all eligibility to any employ District. I authorize the Dent-Phelps R-III School District to independent verification of educational background and employment records. I spect communication regarding employment by any former or current employer of or damages that might result or be claimed because of information provide background investigation has been completed. I have been advised that all applicable state and federal statutes apply to the Phelps R-III is an equal opportunity institution. It is the policy of this District employment on the basis of race, color, gender, age, religion, creed, many veteran status, or any other unlawful basis.	ly verify all information cifically waive any righ f mine. I further release vided. I understand the Dent-Phelps R-III Sc ct not to discriminate in ital status, citizenship,	I have given on this ap t I have to examine a e any institution or individ- at my employment is no hool District practices and its educational program	plication, to include copy of any written ual from any liability of finalized until the diprocedures. Dents and activities or in
Signature	Date		
Your application will be kept on file for 45 d	ays from the date of the	his submission.	
Please use the space below to make any comments, clarify any	y special considerat	ions, or ask a questi	on: