

CHICKASHA PUBLIC SCHOOLS

Personnel Department 900 W. Choctaw Avenue Chickasha, OK 73018 (405) 222-6500 www.chickasha.k12.ok.us

APPLICATION FOR ADMINISTRATIVE APPLICANTS

It is the policy of the Chickasha School District that the best qualified applicant shall be selected for each position without regard to race, color, religious belief, national origin, age, sex, handicap, marital, or veteran status.

REQUIRED APPLICATION MATERIAL

- □ Letter of application
- Resume

- Copies of Oklahoma administrative certificate (if applicable)
- Copies of all university transcripts with degree(s) posted (if applicable)
- □ Completed CPS application (Although this information may be repeated on a resume, complete all blanks)

PERSONAL DATA

Month Day Year Month Day Year PERMANENT ADDRESS Month Day Year House Number, Street, P.O. Box, Apartment Number City State Zip TEMPORARY ADDRESS (if applicable) Please state length of time to be at this address Image: City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip Hadderss	Last Name	First Name	MI	Social Security Number	
TEMPORARY ADDRESS (if applicable) Please state length of time to be at this address House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip E-Mail Address	Date of Application Month	Day Year	Date Available	Month	Day Year
TEMPORARY ADDRESS (if applicable) Please state length of time to be at this address House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip E-Mail Address	PERMANENT ADDRESS		-	, , , , , , , , , , , , , , , , , , ,	
TEMPORARY ADDRESS (if applicable) Please state length of time to be at this address House Number, Street, P.O. Box, Apartment Number City State Zip House Number, Street, P.O. Box, Apartment Number City State Zip E-Mail Address					
House Number, Street, P.O. Box, Apartment Number City State Zip E-Mail Address Cell Phone Work Phone Area Code Number Area Code Number Area Code Number Area Code Number Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Check certification held or for which you have completed all requirement Elementary Assistant Principal Superintendent Superintendent Middle School Assistant Principal Secondary Principal Secondary Principal High School Principal Indicate in thigh School Principal Secondary Principal	House Number, Street, P.O. Box, Ap	partment Number	City	State	Zip
House Number, Street, P.O. Box, Apartment Number City State Zip E-Mail Address Work Phone More Phone Work Phone Area Code Number Area Code Number Area Code Number Area Code Number Area Code Number Area Code Number Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Check certification held or for which you have completed all requirement Elementary Assistant Principal Superintendent Superintendent Middle School Assistant Principal Secondary Principal Secondary Principal High School Principal Indicate Contral Office Administrator: (position)			· 1 · · 1 · 11		
E-Mail Address Work Phone Home Phone Cell Phone Work Phone	TEMPORARY ADDRESS (if applicab	le) Please state length of tim	he to be at this address	г	
E-Mail Address Home Phone Cell Phone Work Phone Area Code Number Area Code Number Area Code Number Area Code Number Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Elementary Assistant Principal Check certification held or for which you have completed all requirement Elementary Principal Superintendent Middle School Assistant Principal Elementary Principal High School Assistant Principal Secondary Principal High School Principal High School Principal	House Number, Street, P.O. Box, A	partment Number	City	State	Zip
Home Phone Cell Phone Work Phone Area Code Number Area Code Number Area Code Number Area Code Number Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Elementary Assistant Principal Check certification held or for which you have completed all requirement Elementary Principal Superintendent Middle School Assistant Principal Elementary Principal Middle School Assistant Principal Secondary Principal High School Assistant Principal Secondary Principal High School Principal (position)	, , , , - , , -		- 5		r
Area Code Number Area Code Number Area Code Number Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Elementary Assistant Principal Check certification held or for which you have completed all requirement Elementary Principal Superintendent Middle School Assistant Principal Elementary Principal Middle School Principal Secondary Principal High School Principal Central Office Administrator:	E-Mail Address				
Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Elementary Assistant Principal Check certification held or for which you have completed all requirement Elementary Principal Superintendent Middle School Assistant Principal Elementary Principal Middle School Principal Secondary Principal High School Principal High School Principal Central Office Administrator: (position)	Home Phone	Cell Phone		Work Phone	2
Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area. Elementary Assistant Principal Check certification held or for which you have completed all requirement Elementary Principal Superintendent Middle School Assistant Principal Elementary Principal Middle School Principal Secondary Principal High School Principal High School Principal Central Office Administrator: (position)					
 Elementary Assistant Principal Elementary Principal Middle School Assistant Principal Middle School Principal High School Assistant Principal High School Principal Central Office Administrator: (position) 	Area Code Number	Area Code	Number	Area Code	Number
 Elementary Assistant Principal Elementary Principal Middle School Assistant Principal Middle School Principal High School Assistant Principal High School Principal Central Office Administrator: (position) 	Indicate in this section the area(s) for w	hich you wish to be conside	red for employment, you r	nav check mo	re than one area
 Elementary Principal Middle School Assistant Principal Middle School Principal High School Assistant Principal High School Principal Central Office Administrator: (position) 	indicate in this section the area(s) for w	men you wish to be conside.	ied for employment, you i	•	
 Middle School Assistant Principal Middle School Principal High School Assistant Principal High School Principal Central Office Administrator: (position) 	Elementary Assistant Principal	Check certification	held or for which you h		
 High School Assistant Principal High School Principal Central Office Administrator: (position) 	2		•	lave complete	ed all requirements
 High School Principal Central Office Administrator: (position) 	Elementary Principal	□ Supe	rintendent	lave complete	ed all requirements
Central Office Administrator: (position)	 Elementary Principal Middle School Assistant Principal 	SupeElem	rintendent entary Principal	ave complete	eu an requirements
	 Elementary Principal Middle School Assistant Principal Middle School Principal 	SupeElem	rintendent entary Principal	ave complete	eu an requirements
List all professional organizations to which you now belong	 Elementary Principal Middle School Assistant Principal Middle School Principal High School Assistant Principal 	SupeElem	rintendent entary Principal	ave complete	eu an requirements
	 Elementary Principal Middle School Assistant Principal Middle School Principal High School Assistant Principal High School Principal 	□ Supe □ Elem □ Secon	rintendent lentary Principal ndary Principal	ave complet	eu an requirements

STUDENT TEACHING: DATE STARTED

Grade/Subject Taught	No. of Weeks	Name and Address of School	College Supervisor & Cooperating Teacher

PROFESSIONAL EXPERIENCE (Include teaching and administrative positions - list most recent first)

DA	TES	Name, Address and Z	Zip of School District	*	Assignment/Job Title
From					
То					
Total Yrs					
	 Principal/S	upervisor	Final Year Salary	Reason For Leaving	
	Lan.	•			
DA	TES	Name, Address and Z	Zip of School District		Assignment/Job Title
From					
То					
Total Yrs					
Name of F	Principal/S	upervisor	Final Year Salary	Reason For Leaving	
DA	TES	Name, Address and	Zip of School District		Assignment/Job Title
From					
То					
Total Yrs					
Name of I	Principal/S	upervisor	Final Year Salary	Reason For Leaving	
OTHER F	EMPLOYN	IENT EXPERIENC	E (Include all other emplo	yment history not listed at	pove - list most recent first)
	TES		Zip of Past Employer	•	Assignment/Job Title
From					
То					
Total Yrs					
Name of S	upervisor		Final Salary	Reason For Leaving	
DA	TES	Name, Address and Z	Zip of Past Employer		Assignment/Job Title
From					
То					
Total Yrs			E	.	
Name of S	Supervisor		Final Salary	Reason For Leaving	

ACADEMIC OR PROFESSIONAL REFERENCES (List 3)

Name	Street Address	City, State, Zip	Area Code/Phone	Occupation

EDUCATION INFORMATION

Graduate of what High School : _

School

Oklahoma Certification Tests Passed

City

State

Colleges Attended (Use separate line for each degree)

College/University	City/State	Dates Attended	Major	Minor	Degree
GRADUATE STUDY	Y				

Do you have a relative who is either a member of the Chickasha Board of Education or who is employed in any capacity in the Chickasha Public School District? Yes No (If yes, please give the following information)

		0
Name of Relative	Relationship	Position Held
Have you ever been employed by this school district?	Yes No	
If yes, dates Position	Under what	Name?
Have you ever been convicted of a felony? \Box Yes \Box	No	
Have you ever been convicted of a criminal offense inv	volving illegal drugs? 🛛 Yes 🛛 🛛 🕬	чо
Have you ever been convicted of a criminal offense inv Have you ever been convicted of a criminal offense inv	0 0	es 🗖No
Are you currently under contract with another district?	□Yes □No If yes	s, where?
Have you ever been dismissed, asked to resign, or refu	sed re-employment? DYes	No

I hereby authorize the Chickasha Public Schools to obtain from my former employers and references all data needed to support this application. I certify that all information on this application is true and complete to the best of my knowledge, and I understand that any withholding or falsification of information on this application may be grounds for dismissal. Please be advised that the Chickasha School District believes that it has a responsibility to seek only those employees who are qualified in every respect. Applicant understands that the School Districts' receipt of a clear national felony record search of their name and fingerprints is a condition of employment. Because applicant desires employment with the School District, applicant autorizes the School District to request and obtain the results of an National felony record search of applicant's name and fingerprints. Applicant hereby releases applicant's felony record search results to the School District. Applicant also releases the School District of any and all liability relating to its request for, receipt, and use of the search results. Applicant understands that if applicant is hired by the School District prior to receipt of the results of the felony record search, applicant will be classified as a temporary employee until notified. Furthermore, applicant understands that if the felony record search reveals a prior felony offense conviction or if applicant provides a false response to one or more of the above questions, then applicant will be denied employment. If applicant is employed prior to receipt of the search results that reveal prior felony, then applicant is deemed to have resigned employment with the School District, effective upon acceptance by the board of education. Applicant waives applicant's right to any and all due process procedures to which applicant might otherwise be entitled under federal and state law and the School District's policies and procedures. Completion of this application does not guarantee an interview or employment with Chickasha Public Schools. Your application will be placed in an active file for one year from the date completed. We will need to be notified of any changes on the application during this time.