

# TARKIO R-I SCHOOL DISTRICT

312 South 11<sup>th</sup> Street  
Tarkio, MO 64991  
660-736-4161  
660-736-4546 (fax)

## Support Staff Application

Name:	Date:	
Other names that may appear on transcripts/records:		
Social Security Number		
Position Applying For		
Current Address		
City	State	Zip
Phone Home:	Other:	

Are you presently employed? \_\_\_\_\_ yes or no

Date Available for Work \_\_\_\_\_

Are you currently on "Lay-off" status and subject to recall? \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? \_\_\_\_\_

(Proof of citizenship or immigration status will be required upon employment.)

### **Return this completed application to the Superintendent of Schools at the above address.**

Tarkio R-I is an Equal Opportunity Employer as per Title VI, Title IX, and Section 504. Tarkio R-I considers applicants for all positions without regard to race, color, religion, sex, national origin, or disability. If you have a disability or handicap that may require accommodations for you to participate in the application process, please make us aware of any accommodation you feel is necessary.

<b>EDUCATION</b>	Name and Address of School	Course of Study	Years Completed	Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				
Other (Specify)				

**WORK EXPERIENCE**

Start with your present or most recent job. Include any job-related military service assignments and/or volunteer activities.

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting/Present	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving			
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting/Present	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving			
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone			
Starting/Present	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving			
Comments: Include explanation of any gaps in employment.			

## EMPLOYMENT QUESTIONS

\_\_\_\_\_ Have you ever been arrested for, charged with, or convicted of a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100)

\_\_\_\_\_ Have you ever pleaded guilty or no contest to a felony or misdemeanor? (Exclude traffic offenses for which you were not sentenced to jail or for which the fine was less than \$100)

\_\_\_\_\_ Has the Missouri Division of Family Services or a similar agency in any other state or jurisdiction ever issued a determination of finding of cause or reason to believe or suspect that you have engaged in physical, emotional, psychological, or sexual abuse or neglect of a child?

\_\_\_\_\_ Have you ever failed to be re-employed by an educational institution?

If the answer to any of the above questions is “yes” please explain.

**READ CAREFULLY BEFORE SIGNING**

I hereby authorize my current and former employers and references to furnish any information about me and about my work experience. I release my current and former employers and references from any and all liabilities or damages of any nature as a result of providing such information. My current and former employers and references may rely on a signed copy of this release.

I understand and consent to having criminal and arrest records checks as well as background checks by the Missouri Division of Family Services as a condition for consideration of my application for employment.

I certify that the answers given in this application are true and complete to the very best of my knowledge. In the event I am employed by the District and in the further event that I have provided false or misleading information in this application or in subsequent employment interviews, I understand that my employment may be terminated at any time after discovery of the false or misleading information.

I understand that this application will be considered active for a time period of 90 days. I understand that if I wish my candidacy to remain open after that date I must inquire again as to whether or not applications are being accepted at that time.

SIGNATURE \_\_\_\_\_

DATE  
\_\_\_\_\_  
-

Describe any specialized training, coursework, or skills you have that pertain to this position.


Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job for which you have applied? Answer this question only after reviewing the job description and requirements of this job.    \_\_\_ YES    \_\_\_ NO

**PERSONAL/PROFESSIONAL REFERENCES** Do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation

Please respond to the following questions in your own handwriting.

Why have you chosen to apply for this particular position?

Describe how your personal and/or professional qualities would be an asset to Tarkio R-I in this position.

