



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

PERSONAL DATA

Use legal name only

Last Name	First Name	MI	Social Security Number

Date of Application	Month	Day	Year	Date Available	Month	Day	Year
----------------------------	-------	-----	------	-----------------------	-------	-----	------

PERMANENT ADDRESS

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

House Number, Street, P.O. Box, Apartment Number	City	State	Zip

E-Mail Address

Home Phone

<small>Area Code</small>	<small>Number</small>

Cell Phone

<small>Area Code</small>	<small>Number</small>

Work Phone

<small>Area Code</small>	<small>Number</small>

Indicate in this section the area(s) for which you wish to be considered for employment, you may check more than one area.

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Elementary Assistant Principal <input type="checkbox"/> Elementary Principal <input type="checkbox"/> Middle School Assistant Principal <input type="checkbox"/> Middle School Principal <input type="checkbox"/> High School Assistant Principal <input type="checkbox"/> High School Principal <input type="checkbox"/> Central Office Administrator: _____ (position) | <p>Check certification held or for which you have completed all requirements.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Superintendent <input type="checkbox"/> Elementary Principal <input type="checkbox"/> Secondary Principal |
|---|---|

List all professional organizations to which you now belong:

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)

DATES		Name, Address and Zip of School District	Assignment/Job Title
From			
To			
Total Yrs			
Name of Principal/Supervisor		Final Year Salary	Reason For Leaving

DATES		Name, Address and Zip of School District	Assignment/Job Title
From			
To			
Total Yrs			
Name of Principal/Supervisor		Final Year Salary	Reason For Leaving

DATES		Name, Address and Zip of School District	Assignment/Job Title
From			
To			
Total Yrs			
Name of Principal/Supervisor		Final Year Salary	Reason For Leaving

OTHER EMPLOYMENT EXPERIENCE (Include all other employment history not listed above - list most recent first)

DATES		Name, Address and Zip of Past Employer	Assignment/Job Title
From			
To			
Total Yrs			
Name of Supervisor		Final Salary	Reason For Leaving

DATES		Name, Address and Zip of Past Employer	Assignment/Job Title
From			
To			
Total Yrs			
Name of 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 _____ City _____ State _____

Oklahoma Certification Tests Passed

Colleges Attended (Use separate line for each degree)

College/University	City/State	Dates Attended	Major	Minor	Degree

GRADUATE STUDY

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)

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? Yes No

Have you ever been convicted of a criminal offense involving illegal drugs? Yes No

Have you ever been convicted of a criminal offense involving illegal use of alcohol? Yes No

Have you ever been convicted of a criminal offense involving minors? Yes No

Are you currently under contract with another district? Yes No If yes, where? _____

Have you ever been dismissed, asked to resign, or refused re-employment? Yes 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 authorizes 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.

Applicant's Signature _____

Date _____