

Please indicate the position, or positions, you are applying for: _____

Do you have any experience as a Coach? Yes No If Yes, please list details of your Coaching experience: _____

Do you currently hold a current Kansas teaching license? Yes No

Is your license a standard teaching license? Yes No An emergency substitute license? Yes No

If you do not hold a teaching license, do you have a minimum of 60 college credit hours to apply for a Kansas Emergency Substitute License? Yes No

Have you had ASEP Training? Yes No If Yes, when and from where? _____

Do you have a valid CDL Driver's License with school bus endorsement? Yes No

Do you have any physical/medical/mental limitations that could prevent you from performing the job you are applying for? Yes No If Yes, please list _____

Have you ever been terminated or suspended from previous employment because of a positive drug or alcohol test? Yes No

Have you received Blood-Borne Pathogen Training? Yes No If Yes, when? _____

Are you familiar with the requirements of FERPA and the Kansas Student Data Privacy Act? Yes No

Do you have a certain age of students that you would **NOT** be comfortable working with? Yes No
If Yes, please explain: _____

Have you ever been employed by CUSD #101? Yes No If Yes, when: _____
Please list your duties: _____

REFERENCES - Minimum of Three (3)			
NAME	TITLE	COMPANY	PHONE

If hired by CUSD 101, you agree to:

- Attend all required in-service and training sessions deemed necessary by CUSD 101.
- Provide a current health certificate to keep on file.
- Support the educational philosophy and mission statement of CUSD 101.
- Adhere to all CUSD 101 policies, all State laws, and all Federal laws.
- Conduct yourself in a professional manner and help provide a positive learning environment for students.
- Be responsible for the sports equipment used during the season, have a proper inventory system to track said equipment, and provide an inventory report to administration at the end of the season.
- Take part in an official evaluation process conducted by the Athletic Director and administration at the end of the season.

ACKNOWLEDGEMENT AND AUTHORIZATION

I certify that all answers given herein are true and complete to the best of my knowledge.

I authorize CUSD 101 to investigate all statements contained in this application and any supporting documentation, as needed, to help support the employment decision process.

In the event of employment, I understand that false or misleading information in my application, in my supporting documentation, or given during my interview(s) may result in immediate dismissal.

I understand that a background check may be conducted which includes, but is not limited to, criminal, motor vehicle and military records.

Signature of Applicant: _____

Date: _____

FOR DISTRICT USE ONLY:

Date Application Reviewed: _____ Department : _____

Date Submitted for Background Check: _____ Date of pre-employment drug screening _____

Interview: _____

Superintendent Signature

Date

