

**GAYLORD COMMUNITY SCHOOLS
ADMINISTRATOR APPLICATION FOR EMPLOYMENT**

615 S. Elm Street, Gaylord, MI 49735

Telephone: (989)705-3080

Job Hotline: (989)705-3099

Fax: (989)732-6029

www.gaylordschools.com

Date: _____ Position Applied For: _____

Last Name First Name Middle E-mail Address

Street City State Zip Area Code Telephone Number

Are you 18 years of age or older? YES NO Are you a citizen of the United States? YES NO

Were you previously employed by us? YES NO If so, when? _____

Are you currently employed? YES NO If so, may we inquire of your employer? YES NO

Have you ever been granted tenure in Michigan? YES NO If so, where? _____

RECORD OF EDUCATION

Name & Location of School	Last Year Completed	Graduated?	Diploma/Degree/Certificate
High School:	9 10 11 12	Yes___ No___	
College:	1 2 3 4	Yes___ No___	
College:	1 2 3 4	Yes___ No___	
College:	1 2 3 4	Yes___ No___	
Other:	1 2 3 4	Yes___ No___	

Type of Certificate: Elementary Provisional Elementary Professional Elementary Continuing

Secondary Provisional Secondary Professional Secondary Continuing

State _____ Certificate Number: _____ Expiration Date: _____

Endorsements: _____

Major: _____ Highly Qualified? _____ Minor: _____ Highly Qualified? _____

Military Service: _____
 Branch

Are you certified or licensed in any skill or profession other than teaching? YES NO

If yes, which skill or profession? _____

Are you presently working toward a higher degree? YES NO

If yes, what is your expected completion date and degree expected? _____

When would you be available for a personal interview? _____

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT BEGINNING WITH YOUR MOST RECENT					
Name/Address of Employer	FROM Month/Year	TO Month/Year	POSITION Describe the work you did	Reason for leaving	Name of Supervisor
Telephone:					

Name/Address of Employer	FROM Month/Year	TO Month/Year	POSITION Describe the work you did	Reason for leaving	Name of Supervisor
Telephone:					

Name/Address of Employer	FROM Month/Year	TO Month/Year	POSITION Describe the work you did	Reason for leaving	Name of Supervisor
Telephone:					

Name/Address of Employer	FROM Month/Year	TO Month/Year	POSITION Describe the work you did	Reason for leaving	Name of Supervisor
Telephone:					

Total Number of School Years as Teacher _____ Total Number of School Years as Administrator _____
 (Not including substitute teaching)

EDUCATIONAL/EMPLOYMENT REFERENCES		
Name & Occupation	Address	Phone Number

PERSONAL REFERENCES (Not former employers or relatives)		
Name & Occupation	Address	Phone Number

List any experiences, skills or qualifications which you feel would suit you for work with our organization.

List experience you have had working with youth of school age, such as scout work, summer camp, etc.

List membership in honorary, collegiate, educational and community organizations.

Organization	From: Month/Year	To: Month/Year	Currently Active?

List leadership roles that you have experienced.

Role	Organization	Location	Dates

Have you ever been convicted of a crime? YES NO

Are there any felony charges pending against you? YES NO

Can you perform the essential duties of the job in which you wish to be employed, with or without accommodation? YES NO

I have made application for employment with Gaylord Community Schools (the "District"). I hereby authorize the District to make a thorough investigation of my past employment. I also authorize my previous employers to release to the District any and all information and records which they may have, personal or otherwise, concerning my previous employment. By way of example, but not by way of limitation, I also authorize the District to request and my previous employers to disclose any information about my attendance, punctuality, work performance, knowledge of subject matter and ability to relate to others. I understand that making any misleading or untruthful statement on this application may result in my dismissal if I am appointed. If accepted for employment, I understand that this application will become a permanent part of my personnel record.

Signature of Applicant

Date

Please return to:
Gaylord Community Schools, Personnel Office, 615 S. Elm Street, Gaylord, MI 49735

<p>STATEMENT OF NONDISCRIMINATION</p> <p>It is the policy of Gaylord Community Schools that no person shall, on the basis of race, color, religion, national origin or ancestry, gender, age, disability, height, weight, marital status or any other legally protected characteristic be excluded from participation in, be denied the benefits of, or be subjected to discrimination during any program, activity, service or in employment. Inquiries should be addressed to: Civil Rights Coordinator, 615 S. Elm Street, Gaylord, MI, 49735, (989) 705-3080.</p>
--