

# WACO COMMUNITY SCHOOLS

# APPLICATION FOR EMPLOYMENT LICENSED

706 N. Pearl • Wayland, Iowa 52654 • 319/256-6201 • Fax 319/256-6213

Applicant's Full Name \_\_\_\_\_  
(Last) (First) (M.I.) (Maiden)

Other Name(s) \_\_\_\_\_  
(Please provide any names used in a school or employment context to enable a check on your work or school record.)

Present Mailing Address \_\_\_\_\_  
(Street)  
(City) (State) (Zip)

Permanent Mailing Address \_\_\_\_\_  
(Street)  
(City) (State) (Zip)

### Telephone Numbers:

Present: ( ) Permanent: ( ) Work: ( )

Social Security Number \_\_\_\_\_ (Note: Social Security number is optional and failure to submit it on this form will not prohibit employment consideration. Social Security number may be required on other forms prior to employment.)

I hereby certify that all application statements are true and complete to the best of my knowledge, and that, if employed, false statements shall be sufficient cause for immediate dismissal. I also understand that before any contract becomes effective or compensation is possible, a valid Iowa Teaching Certificate and a completed school district physical examination form must be filed with the School Board Secretary for the WACO Community School District. I further understand that if I accept a position with the WACO Community School District, the statements on this application will become part of my permanent record.

Date \_\_\_\_\_

Signature of applicant

### CHECK APPLICATION STATUS:

New Application  
 Previous Application  
on File  
 Former Employee of  
the School District

Month, Day, and Year  
available for employment:  
\_\_\_\_\_

### CHECK THE POSITION(S) DESIRED:

Teacher  Administrator  
 Guidance  Supervisor  
 Library/Media  
Other (Explain)

List grade level(s) and/or subject  
area(s) in order of preference:

**I. CERTIFICATION**

**A. If you have been issued an IOWA LICENSE, please submit a photocopy....**  
**Copy enclosed? No \_\_\_ Yes**

**Type of IA Certificate: Provisional \_\_\_ Permanent**  
**Educational \_\_\_ Substitute**

**Year of Expiration of Iowa license**  
**Endorsement(s)**

**Have you applied for Iowa license? No \_\_\_ Yes**  
**When? \_\_\_\_\_ Check if statement of eligibility enclosed**

**B. If you have been issued a LICENSE IN ANOTHER STATE, please submit a photocopy. Copy enclosed? No \_\_\_ Yes**

**State \_\_\_\_\_ Expiration Date**  
**License/Endorsements**

**II. GENERAL INFORMATION**

**A. Contract Status**

**1. Are you currently under contract? No \_\_\_ Yes**  
**If yes:**  
**Where? \_\_\_\_\_ Present Position**

**What type? Probationary \_\_\_ Continuing/Tenure \_\_\_ Annual**  
**Other \_\_\_ (Explain)**

**Why do you wish to change jobs to the WACO Community School District?**

**III. EDUCATIONAL AND PROFESSIONAL TRAINING (List chronologically)**

Level of Education	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation	Dates of Attendance From...To
High School						
College or University						

**IV. STUDENT TEACHING EXPERIENCE** (List chronologically and include any internships.)

Name of School	School Division City/County	State	Grade Level and/or Subject	Dates	Personnel Use

**V. TEACHING EXPERIENCE** (List chronologically all teaching experience. DO NOT INCLUDE SUBSTITUTE TEACHING.)

Name of School	School Division City/County	State	Position Held Grades and/or Subjects Taught (Specify)	Dates Mo./Day/Yr. (From..To)	Total Years	Full Time (X)	Part Time (X)	Personnel Use
<b>Total</b>								

**VI. EXTRACURRICULAR ACTIVITIES**

Indicate the number of years experience in the activities listed below. Circle activities you are willing to coach/sponsor:

Extra Curricular Activities	High School Experience	College Experience	Contract Experience	Extra Curricular Activities	High School Experience	College Experience	Contract Experience
Football				Honor Society			
Basketball				Cheerleaders			
Baseball				Athletic Trainer			
Softball				Forensics			
Track				Debate			
Cross Country				Drama			
Wrestling				Yearbook			
Gymnastics				Newspaper			
Field Hockey				Literary Magazine			
Golf				Student Government			
Tennis				Other Clubs			
Volleyball							
Soccer							

**VII. WORK EXPERIENCE OTHER THAN TEACHING** (List chronologically and attach a sheet if necessary.)

Employer	City/County	State	Kind of Work	Dates of Employment	Personnel Use

**VIII. DISCIPLINARY HISTORY.** (If the answer to any of the following questions is "yes", please include an explanation on the back of this page.)

1. Have you ever been refused tenure, reappointment or a continuing contract? .....No  Yes
2. Have you ever been discharged or requested to resign from a position? .....No  Yes
3. Have you ever had a certificate or license revoked or suspended? .....No  Yes
4. Have you been convicted of criminal conduct in the past seven (7) years? .....No  Yes
5. Are any criminal charges or proceedings pending against you? .....No  Yes
6. Have you ever been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child or any felony? .....No  Yes
7. Have you ever been convicted of a drug or alcohol related charge? .....No  Yes

**IX. PROFESSIONAL REFERENCES**

It is the applicant's responsibility to have the following information provided to the School District in order to be considered for employment:

- A. The names of at least three professional reference sources including current employer if employed, or last employer if not currently employed.
- B. Unless included in Placement File, applicants with teaching experience must provide recommendations from principals and/or superintendents for all contracted educational employment within the past three years. If experience was not within the past three years, provide references from most recent contracted position.
- C. Please indicate:  a Placement File is being sent,  References are listed below.

	NAME OF REFERENCE	POSITION/RELATIONSHIP	MAILING ADDRESS	PHONE NUMBER
1				
2				
3				

**X. MILITARY EXPERIENCE**

Branch of Service	Occupational Specialist (MDS)	Inclusive Dates	Type of Discharge

**XI. OTHER INFORMATION**

To avoid conflict of interest, do you have any relative(s) who are employees or board members in the school district and site relationship. \_\_\_\_\_

Estimate your total absence from work or school for the last three years and explain the reason(s) \_\_\_\_\_

Will you require any accommodation in order to perform the essential functions of the position you seek? Explain: \_\_\_\_\_

Are you a U.S. Citizen?  Yes  No      If not, are you eligible to work in the U.S.?  Yes  No

The WACO Community School District does not discriminate on the basis of race, creed, color, national origin, age, religion, socio-economic status, political affiliation, disability, or gender in its educational programs or employment. No person shall be denied employment solely because of any impairment which is unrelated to the ability to engage in activities involved in the position or program for which application has been made. Questions or concerns should be directed to the Superintendent of Schools.

**Last, First (Please print)**

**ESSAYS**

**In your own handwriting, please respond to the following questions in the spaces provided.**

**1. What do you believe you have to contribute as a teacher?**

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**2. Please describe the kind of relationship you most want to develop with students.**

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**3. What teaching strategies do you find to be most effective?**

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**4. How do you believe students will most benefit from your instruction, class and/or subject?**

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**Signature**

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**Date**