



District OR-1: Home of the Panthers!!

Application for Certificated Personnel
District OR-1 Public Schools
An Equal Opportunity/Affirmative Action Employer
425 F. Street Palmyra, NE 68418
Phone: (402) 780-5327 Fax: (402) 383-4008

It is the policy of District OR-1 Public Schools to not discriminate on the basis of sex, handicap or disability, race, color, religion, marital status, veteran status, or national or ethnic origin, or on the basis of genetic information, in its educational programs, admission policies, employment policies or other administered programs. This position is subject to a veteran's preference. Persons requiring accommodations to apply and/or be considered for positions with District OR-1 are asked to make their request to the Superintendent.

POSITION APPLYING FOR: _____

CONTACT INFORMATION:

Name: _____
First Middle Last (Maiden)

Address: _____ Telephone (____) _____
Street City State Zip

E-mail address: _____

EDUCATIONAL PREPARATION:

Degree Earned: _____ Hours Above Degree: _____

Major: _____ Minor: _____

Endorsements: _____

College or University: _____

*** Attach a photocopy of your current teaching certificate. (Front and back) * If you are in the process of applying for a certificate, please indicate date of application.**

Sport or student activity you would feel qualified to coach or sponsor?

Sport: 1. _____ 2. _____ 3. _____

Activity: 1. _____ 2. _____ 3. _____

Describe Your Experiences/Success/Qualifications for selected activities:



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EDUCATIONAL WORK EXPERIENCE: *Include most recent experience first.*

Years Taught	Position	Grades and Subject Taught & Extracurricular Duties	Name and Mailing Address of School	Reason for Leaving

REFERENCES:

List names and addresses of persons who are qualified to answer questions concerning your fitness for the position you seek. Include supervisors, principals and superintendents under whom you have taught. *If you have not taught previously, include the names of cooperating teachers, college or university supervisors and building principals who have been associated with your student teaching.* Indicate with an (*) any reference which is also included in your credentials.

Name	Position	Contact Info: Telephone & Complete Mailing Address

NOTE: Please include at least three current letters of reference with your application. If your reference letters are not attached, please indicate the reason for their omission (letter is pending, etc.)

VETERAN PREFERENCE

If you wish to be considered for a Veterans Preference please indicate ___ Yes ___ No, and submit the appropriate documentation with your application. Note: This section is optional; you need to request a Veterans Preference even if you are eligible, and if you do not request the preference, you need not submit information about your veteran status.

- 1. Applicant Veteran?** ___ Yes ___ No. If yes, submit DD Form 214.
- 2. Disabled Veteran?** ___ Yes ___ No. If yes, submit DD Form 214 and Veteran’s disability verification.
- 3. Spouse of 100% Disabled Veteran?** ___ Yes ___ No. If yes, submit DD Form 214, veteran’s disability verification and proof of marriage.
- 4. Spouse of Veteran on active duty at this time or within 180 days of the spouse’s discharge or separation of service.**
___ Yes ___ No.

This professional application is only one part of your application file. To complete your application, the following need to be provided:

- _____ Letter of Application and Resume
- _____ Transcripts and Professional Credentials
- _____ Three Letters of Recommendation
- _____ Copy of a Valid Nebraska Teaching Certificate



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APPLICATION QUESTIONS:

Directions: Please answer each of the questions below. If more space is needed, please attach additional pages.

Eligibility for Hire:

- Are you now under contract with another school district? ___ Yes ___ No.

If yes, with which school are you under contract & why do you wish to leave your current position? _____

- Do you have any condition (physical, mental, or otherwise) which prevents you from performing the essential functions of any of the positions for which you have applied, with or without accommodation? (Note: regular, dependable attendance is an essential function of certificated positions at District OR-1).

___ Yes ___ No. If yes, describe: _____

Prior History:

- Have you ever had failed or refused to fulfill a contract of employment with any school district? ___ Yes ___ No.

If yes, describe: _____

- Have you ever had a diploma, credential, or certificate denied or revoked? ___ Yes ___ No.

If yes, describe: _____

Interest in District OR-1:

- Why do you want to be employed at District OR-1?

- What experiences have you had with District OR-1 or the communities of Palmyra and Bennet?

Application Questions: *Please complete the following questions as it relates to the position for which you are applying.*

- Describe an effective teacher:

- Describe the professional strengths and personal characteristics you possess and explain how these traits will help you be successful in this position:

- Describe how you will connect positively with students and staff:



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PERSONAL DISCLOSURE:

Please respond to EACH item. If there is no response to any item, or if the required attachments do not accompany your application, your application WILL BE REMOVED FROM CONSIDERATION. Information provided in this disclosure will not automatically bar you from employment but will be considered in view of all relevant circumstances.

1. Have you ever received a ticket, been charged with, or been convicted of, a criminal offense relating to sexual or physical abuse?
Yes___ No ___

2. If you answered “Yes” to Question #1 above, you must explain each situation including location(s), date(s), agency(ies) involved, and the outcome of the each ticket, charge, or arrest (use an attachment if needed):

3. Have you ever had any license, permit, or certificate terminated, revoked, suspended, received a private or public reprimand or admonishment from a licensing agency or been subject to a judicial restraining or contempt order?
Yes___ No ___

4. If you answered “Yes” to Question #3 above, you must attach an explanation of each situation including location(s), date(s), agency(ies) involved, and the outcome of the each situation (use an attachment if needed):

5. Have you ever been involuntarily terminated or asked to resign, or resigned in lieu of termination from employment?
Yes___ No___

6. If you answered “Yes” to Question #5 above, you must explain each situation including the name of the employer(s), the date(s) and reason(s) for the resignation or termination.

Note: School policy requires that a criminal history record information check be completed prior to employment.

VERIFICATION

I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand it is my responsibility to immediately provide updated, correct information if any of the information changes at any time. I understand that any omission, falsification or misrepresentation made by me on this application or any supplement will be sufficient grounds for failure to employ me or for my discharge should I become employed with the school district. I understand that disclosure of social security number is optional. It will be used to conduct background checks for employment purposes and for personnel and payroll processing and required reporting if I am employed.

Legal Signature of Applicant

Date