

Dolores School District RE-4A Home of the Bears EQUAL OPPORTUNITY EMPLOYER

Administrator Application

Date of Application:

P.O. Box 727 / 100 N. 6th St., Dolores, CO 81323 · Phone (970) 882-7255 · Fax (970) 882-7685 · doloresschools.org

REQUIRED APPLICATION MATERIALS Please submit the following items with your application:

- Resume
- Four recent letters of reference
- Copy of Colorado Principal or Administrator's License (out-of-state applicants are encouraged to apply for a Colorado license immediately)
- Transcripts supporting qualification for position (copies are accepted during the application process but official transcripts will be required at time of hire)
- Written responses to the following questions (each not to exceed more than 150 words)
 - 1. What do you believe are the three most important functions of an Administrator?
 - 2. How do you maintain and/or improve staff morale ?
 - 3. What do you believe is the best way to get people in your school building to work together, collaborate, and make the best decisions possible for students?

APPLICANT INFORMATION

l am interested in the following p	position(s):							
Name:								
Last			First			Middle		
Mailing Address Street (or P.			City		State	Zip		
Home phone ())		Phone (<i>Σ</i> ιμ		
)		n none ()			
Email:address:								
For Background Check purpose	s: Date of Birth		Social Security nu	ımber				
LICENSE INFORMATI	ON List license(s) currently	held						
Гуре	State	_ Endorsement(s)			Expi	res		
Туре	State	_ Endorsement(s)			Expi	res		
Гуре	State	_ Endorsement(s)			Expi	res		
If license not yet issued, date of applic	ation							
EDUCATION YOU MAY N	OT SUBSTITUTE A RESUME	for the completic	on of this section. P Month/Year		dditional paper if gree/Certificate	necessary. Semester Hours		
Name of School(s)	Location		From / To		Major/Minor			

ADMINISTRATOR /TEACHING EXPERIENCE YOU MAY NOT SUBSTITUTE A RESUME for completion of this section. All

experience related to education must be listed. Explain all gaps in employment. Please make multiple copies of this page if necessary to provide a complete employment history. Most recent employer/position: Are you currently working for this employer? Yes No If yes, may we contact them? Yes No Supervisor's Current Phone Number Name of employer Supervisor's Name From () Тο Location - City Dates employed State Alternate Phone Number for Supervisor Reason for leaving Position/Job Title Grade Level and / or Subjects Taught 2nd most recent employer/position: Are you currently working for this employer? ___Yes ___No If yes, may we contact them? ___Yes ___No)_ Supervisor's Current Phone Number Name of employer Supervisor's Name From ()_ Location - City Alternate Phone Number for Supervisor Dates employed State Position/Job Title Grade Level and / or Subjects Taught Reason for leaving 3rd most recent employer/position: Are you currently working for this employer? ___Yes ___No If yes, may we contact them? ___Yes ___ No Supervisor's Current Phone Number Name of employer Supervisor's Name From ()_ Dates employed Location - City State Alternate Phone Number for Supervisor Position/Job Title Reason for leaving Grade Level and / or Subjects Taught 4th most recent employer/position: Are you currently working for this employer? ___Yes ___No If yes, may we contact them? ___Yes ___ No Supervisor's Current Phone Number Name of employer Supervisor's Name From Тο) Location - City Alternate Phone Number for Supervisor State Dates employed

Reason for leaving

Position/Job Title

Grade Level and / or Subjects Taught

5th most recent employer/position: Are you currently working for this employer? Yes No If yes, may we contact them? Yes No

Name of employer		ervisor's Name	Supervisor's Current Phone Number
FromTo Dates employed	Location – City	State	() Alternate Phone Number for Supervisor
Reason for leaving	Position/Job Title	Grade Level and / or	r Subjects Taught

Dolores School Re-4A does not discriminate on the basis of race, color, sex, religion, national origin, ancestry, creed, age, marital status, sexual orientation, genetic information, disability, or need for special education services in admission or access to, or treatment of employment in its educational programs or activities

OTHER WORK EXPERIENCE: Attach additional paper if necessary.

Most recent employer/position

Supervisor's Name	Supervisor's Current Phone Numbe
Location – City	State
Position/Job Title	Grade Level and / or Subjects Taught
/er/position:	
	()
Supervisor's Name	Supervisor's Current Phone Numbe
Supervisor's Name	Supervisor's Current Phone Numbe
	Location – City

REFERENCES These should be persons qualified to give an honest appraisal of your character and job performance. If possible, please include supervisors and teachers with whom you have worked other than those listed under teaching experience.

Name	Position	Location	Current cell /phone number / e-mail address

ADDITIONAL INFORMATION This information will not be deemed part of the employment application for purposes of the Open Records Act. Answer <u>ALL</u> of the following questions with a 'YES', or 'NO' answer in the appropriate space. <u>Provide explanations for any 'YES' answer(s) on a separate page, including</u> details of court name, location, and disposition of the event.

- ___No ___Yes 1. Have you ever been discharged, asked to resign from any position, or placed on a remediation plan?
- ____No ____Yes 2. Have you ever been convicted of / charged with a violation of law other than a misdemeanor traffic violation?
- ____No ____Yes 3. Have you ever been convicted of, pled guilty to, pled no contest to, or received a deferred sentence for a crime involving unlawful sexual behavior or other unlawful behavior toward a child?
- ___No ___Yes 4. If you hold, or held a Department of Education issued license/certificate, has your license/certificate ever been suspended or revoked?

DId you answer all 4 questions? Did you provide your written explanation to any "YES" answers? If missing, your application cannot be processed.

I understand that I will need to be fingerprinted as I apply for certification in the State of Colorado. I hereby authorize an investigation and release of information concerning my past employment, activities and statements contained in this application. I waive my right of access to any such information and release from all liability and responsibility of all persons, companies or corporations supplying or receiving such information. I certify that all answers and statements contained herein are true, correct and complete and further, it is my understanding that any false statements or omissions made by me on this application or any supplement thereto, shall be grounds for failure to employ or dismissal should I be employed.

Signature of applicant	Date
Note: Applications are kept on file for two years.	

Mail	your	complete	applicatio	n	packet	to:
			or scan a	and	d email	to:

District Secretary, Dolores School District RE-4A, P.O. Box 727, Dolores, CO 81323 District Secretary at: <u>hr@dolores.k12.co.us</u>