



Metropolitan School District of Steuben County

400 South Martha Street

Angola, IN 46703

260.665.2854

260.668.7914 Fax—Business Office

260.665.9155 Fax—Administrative Offices

Web Site: www.msdsteuben.k12.in.us

Member: North Central Association

PERSONNEL APPLICATION FOR ADMINISTRATION

PLEASE FILL OUT ALL BLANKS WITH COMPLETE, DETAILED INFORMATION. **Your application must include a copy of your transcript(s) and Indiana Administration license.** You are encouraged to attach a vita sheet. Those applicants who desire or believe they will need one or more accommodations to participate in the application and interview process should contact the above address and telephone number.

Date: _____ Position Being Sought: _____

Name: _____
Last First Middle

Home Address: _____
Street City State Zip

Home Telephone Number: _____ Business Telephone Number: _____

Business Address: _____
Street City State Zip

E-mail Address: _____

Present Position: _____

Length of Service: _____ Years at current corporation: _____ Years at current position: _____

Name of School District: _____

Grade Levels Served: _____ Total Pupils Enrolled: _____

Number Certified Staff: _____ Number Classified Staff: _____

Do you hold or are you currently eligible to obtain a valid Indiana Principal's License: _____

Yes

No

The School Board of Trustees declares it the policy of the Metropolitan School District of Steuben County to provide equal educational and employment opportunities regardless of race, creed, color, religion, national origin, age, gender, and where applicable marital status, familial status, parental status, domicile, disability, genetic information, veteran status, sexual orientation, political beliefs, reprisal, or any legally protected characteristic. For inquiries of: Title IX, Section 504, American With Disabilities Act Contact: Director of Curriculum & Instruction, 400 S. Martha Street, Angola, IN 46703, (260) 665-2854

REFERENCES

List the names of five (5) persons who know your professional background and qualifications and may be contacted for a reference. Include board members, administrators, professors, and members of the community.

Name	Address	Office Phone	Home Phone
1.			
2.			
3.			
4.			
5.			

EDUCATION

Undergraduate

<u>Institution</u>	<u>Dates Attended</u>		<u>Major/Minor</u>	<u>Degree & Date</u>
	<u>To</u>			

Graduate

<u>Institution</u>	<u>Dates Attended</u>		<u>Major/Minor</u>	<u>Degree & Date</u>
	<u>To</u>			

Additional Educational Preparation (including specialized seminars, training, workshops, etc.)

<u>Institution</u>	<u>Dates Attended</u>	<u>Specialization</u>

CERTIFICATES HELD (Type, State, and Expiration Date)

PROFESSIONAL EXPERIENCE (List in order, most recent first)

<u>Employer</u>	<u>Position</u>	<u>Dates of Service</u>

MEMBERSHIPS AND AFFILIATIONS (educational and other)

<u>Organizations</u>	<u>Leadership Role</u>	<u>Dates</u>

HONORS AND DISTINCTIONS

List degrees, honors, awards, commendations, or other distinctions received:

COMMUNITY ACTIVITIES

Share ways you have been involved in your community:

<u>Community</u>	<u>Remarks</u>

AUTOBIOGRAPHICAL STATEMENT

On a separate sheet(s) please provide a full statement concerning your background and experience focusing particularly upon your qualifications for a principal position at MSD of Steuben County.

PERSONAL RESPONSE QUESTIONS

On a separate sheet(s) please respond to the following questions:

1. List in strength priority the talents and skills you possess as a successful administrator.
2. Briefly identify your three most significant professional accomplishments including appropriate dates.
3. What are your sources for educational practice, research, and innovation?
4. What area(s) do you feel the most qualified for the building principal position? What area(s) do you feel the least qualified?
5. What have you done to improve student achievement?
6. List your unique qualifications that may distinguish you from other candidates for this position?

The following should be submitted:

- Letter of interest
- Current resume
- Completed application form
- College or university placement credentials
- Official transcripts of all degree work
- Copy of administrative license
- At least three letters of recommendation

OTHER QUESTIONS

- Yes No 1. Is your conduct as an employee or the quality of your work the focus of any investigation by your current employer?
- Yes No 2. Have you ever been reprimanded, disciplined, discharged, had your employment contract non-renewed, or asked to resign from a prior position?
- Yes No 3. Have you ever resigned from a position after being offered the opportunity to resign rather than be terminated?
- Yes No 4. Have you ever resigned from a prior position without being asked; but under circumstances involving your employer's investigation of sexual conduct with another person, mishandling of funds, or criminal conduct?
- Yes No 5. Have you ever had your teaching license suspended or revoked by any entity that may issue a teaching license?
- Yes No 6. Have you ever had an inquiry with the Department of Child Service where you have been the subject of a substantiated report of child abuse or neglect?
- Yes No 7. Have you ever had an inquiry with the Child Welfare Agency in any state where you have committed child abuse or neglect?
- Yes No 8. Have you ever been investigated for, charged with, or pled guilty or "no contest" to any crime involving the sexual abuse of any person or indecency with a minor?
- Yes No 9. Have you ever pled guilty, been convicted of, or otherwise been found in violation of the law by a court for any matter other than a minor traffic violation?
- Yes No 10. Have you ever been charged with a crime, other than a minor traffic offense, where the court has deferred further proceedings without entering a finding of guilt and placed you on probation or in a public service or education program?

If you have answered **yes** to any of the ten questions, please explain on a separate paper including the date of the incident, charge, any court action taken, the offense in question, and the address of any court involved.

AUTHORIZATION AND RELEASE

I certify that the information given on this application is true and complete to the best of my knowledge.

I authorize the M.S.D. of Steuben County to check my employment history, including without limitation, reference checks, and to seek the release of investigatory information, including "limited criminal history," possessed by any private or public employer or any local, state, or federal agency. I authorize these private or public employers, or local, state, or federal agencies to provide the M.S.D. of Steuben County any information they may release concerning the matter described herein, and I will cooperate to the extent necessary to obtain the release of this information.

I expressly waive in connection with any request for, or provision of such information, any claims or causes of action, including without limitation, defamation, infliction of emotional distress, invasion of privacy or interference with contractual relations that I might otherwise have against the M.S.D. of Steuben County, its officials, employees, trustees, or agents, or against any individual, corporate, and/or agency provider of such information. I have read this authorization and release of all claims, and I expressly agree to the terms set out herein.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the M.S.D. of Steuben County.

Signature

Date

Should this application be treated as confidential with regard to your present employer? Yes No

PLEASE SIGN, DATE, AND MAIL BACK TO THE ADDRESS BELOW

MSD of Steuben County
Attn: Dr. Brent Wilson
400 S. Martha Street
Angola, IN 46703
Phone: (260) 665-2854 Fax: (260) 665-9155
Email: bwilson@msdsc.us