

# U.S.D. #430

## SOUTH BROWN COUNTY

### APPLICATION FOR SCHOOL PRINCIPAL

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Address:  
Residence \_\_\_\_\_ Business \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Phone Numbers: \_\_\_\_\_  
(Residence) (Business)

Date of Application: \_\_\_\_\_

Please forward credentials and  
Address application materials to:

Steve J. Davies, Ph.D.  
Superintendent of Schools  
U.S.D. #430, So. Brown County  
522 Central  
Horton, Kansas 66439

## PROFESSIONAL DATA

1. Current Employment \_\_\_\_\_
2. Are you now under contract? \_\_\_\_\_ If so, when does your contractual obligation expire? \_\_\_\_\_
3. Are you now certified to be a Principal in Kansas? \_\_\_\_\_

## CHRONOLOGICAL EDUCATION EMPLOYMENT

School Name & Location	District Enrollment	Position Or Duties	Dates	Salary

4. Professional memberships relevant to position applied for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. List names, addresses and phone numbers of two character or professional references:
1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_
  2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

6. List three persons who may be contacted to give current information on your qualifications for the principal's position.

(1)

(2)

(3)

Name: _____	_____	_____
Position: _____	_____	_____
Address: _____	_____	_____
Phone: _____	_____	_____

Is it permissible to contact any or all of the above references? \_\_\_\_\_ If no, after what date will contacts be permissible? \_\_\_\_\_

If you are selected for the position, is it permissible for the board to visit your current district? \_\_\_\_\_ Yes \_\_\_\_\_ No

**PERSONAL DATA**

- Do you have health problems that may affect your ability to perform your duties as principal?
- Have you ever been convicted of a crime involving moral turpitude? \_\_\_\_\_

**EDUCATIONAL DATA**

- High school and date of graduation \_\_\_\_\_
- College training in chronological order:

School Attended & Location	Inclusive Dates	Degree and/or Hours	Major Field	Minor Field	Workshops or Seminars

3. Number of semester hours in major field: \_\_\_\_\_ Graduate \_\_\_\_\_
4. Number of semester hours in minor field: \_\_\_\_\_ Graduate \_\_\_\_\_
5. College honors and activities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**OTHER WORK EXPERIENCE**

Employer & Location	Duties	Months	Dates	Salary

**CANDIDATES EDUCATIONAL STATEMENTS**

Please provide a brief narrative statement concerning your knowledge of or management skills in each of the following areas: (Attach separate sheet)

- Management skill in school curriculum and planning
- Management skills in working with school staff
- Knowledge of the High Schools That Work network
- Knowledge of outcomes-based education
- Knowledge of evaluation of programs and people

## ADDITIONAL DATA

1. If selected for this position, what are your ideas to effect a transition in the high school from a traditional college prep program to an integrated academic vocational program?
2. State briefly your reasons for wishing to be a Principal in this school district.
3. Please mention here anything not included elsewhere in this application which you feel will further support your candidacy.

Have you ever been convicted of a felony or a crime involving dishonesty, a controlled substance or a child? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever entered into a criminal diversion agreement after being charged with any offense described in question A? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are criminal charges pending against you in any state involving any of the offenses described in question A? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever had a teacher or school administrator's certification denied, suspended or revoked in any state? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is disciplinary action pending against you in any state regarding a teaching or administrator's license or certificate? \_\_\_\_\_ Yes \_\_\_\_\_ No

Notice of Non Discrimination

Applicants for admission and employment, students, parents of elementary school students, employees, source of referral of application for admission and employment, and all unions or professional organizations holding collective bargaining on the basis of race, color, national origin, sex, age or handicap in admission or access to, or treatment or employment in its programs and activities. Any person having inquiries concerning Unified School District #430 compliance with the regulations implementing Title VI, Title IX, or Section 504 is directed to contact the Superintendent, 522 Central Avenue, Horton, Kansas 66439, 785-486-2611. The Superintendent has been designated by Unified School District #430 to coordinate the institution's efforts to comply with the regulations implementing Title VI, Title IX and Section 504. Any person may also contact the Assistant Secretary of Civil Right, U.S. Department of Education, regarding the institution's compliance with the regulations implementing Title VI, Title IX, or Section 504.

**APPLICANT JOB APPLICATION ACKNOWLEDGEMENTS**

I certify that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire or, if I am hired and the same is discovered thereafter, termination.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.

I authorize you to request, receive, and verify all information given on this application and I release you from all damages that may result from your doing so.

I authorize you to conduct a criminal background investigation using any and all methods necessary to successfully complete such investigation, and I release you from all liability for any damages that may result from your doing so.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date