

PETTIS COUNTY R-XII SCHOOL

PARAPROFESSIONAL APPLICATION

Name	Social Security #	Date of Birth	
Address	City	State	Zip Code
Home Phone	Cell Phone	email	

Are you a Certified Teacher with the State of Missouri? Yes No If yes, please provide a copy of your certificate.

Are you currently collecting retirement from the Public School Retirement System of Missouri? Yes No

Do you have a current substitute certificate? Yes No If yes, please provide a copy of your certificate.

Do you have a current finger print clearance? (less than 12 months old) Yes No

Have you ever worked in our school district? Yes No

If yes, please provide dates and name(s) used during employment.(if different from current name).

Please list any other school districts in which you have taught or substitute taught.

Work Experience: (please list two most recent)

Place of Employment	Place of Employment
Job Description	Job Description
Supervisor	Supervisor
Phone #	Phone #

Please add any additional comments/information that may be helpful (i.e. areas of teaching certification, prior school, preschool or daycare experience, etc.)

--

Has your employment ever been non-renewed? Yes No If yes, please attach a written explanation.

Have you ever been served with a notice of deficiencies or warning letter? Yes No If yes, please attach a written explanation.

Have your ever been served with a statement of charges seeking the termination of your employment? Yes No If yes, please attach a written explanation.

Have you ever resigned to avoid being served with a statement of charges seeking the termination of your employment? Yes No

If yes, please attach a written explanation.

Have you ever been fired, dismissed, terminated or otherwise involuntarily discharged from your employment? Yes No If yes, please attach a written explanation.

Have you ever resigned in lieu of being fired, dismissed, terminated or otherwise involuntarily discharged from your employment? Yes No

Have you ever entered into a separation of settlement agreement in connection with either the voluntary or involuntary termination of your employment? Yes No

Please list three personal references that we may contact that have known you for at least five years.

Name	Occupation	Phone Number	Year Know

Signature	Date
-----------	------