



OSCEOLA PUBLIC SCHOOLS
OFFICE OF THE SUPERINTENDENT
565 S. Kimmel, P.O. Box 198
Osceola NE 68651



APPLICATION OF

First

Middle

Last

Present Address

Until

Phone

Permanent Address

Phone

FOR PROFESSIONAL POSITION OF

(Indicate grades, subjects, or assignments in order of preference)

Date

The applicant should exercise the greatest care in completing this form. An applicant must hold a valid Nebraska Certificate or show evidence that one can be issued prior to the beginning of the school term. All applicants for a teaching position must meet the requirements of the North Central Association and Nebraska Accreditation Standards.

PROFESSIONAL PREPARATION

Name of School and Location (Include high school, college, and graduate work)	Dates	Semester Hours Credit	Degree or Diploma	Major/Minor
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EXPERIENCE

Name of School and Location	Inclusive Dates	No. of Teachers in System	Nature of Work. Specify grade and/or subject area; special assignments
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Reason for leaving last position _____

If not an experienced teacher:

Student Teaching Name of School and Location	Dates	Semester Hrs. Credit	Supervisor	Cooperating Teacher
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Placement Bureau from which credentials will be sent: _____

It is the candidate's responsibility to request that credentials and transcripts be forwarded to the Osceola Public Schools.

TEACHING CERTIFICATE

What Nebraska certificate do you now hold or will you be eligible for? (If you hold an out-of-state certificate please designate which state).

Type _____ Expiration Date _____

Endorsements _____; _____; _____

Have you ever failed to be re-certified? _____ Where? _____

(If answer is yes, attach a complete statement). When? _____

ALL CANDIDATES

Check any of the following that you might be able to sponsor, direct, coach, manage, or assist. Circle B for boys and/or G for girls.

Basketball	B_____ G_____	Band	_____
Track	B_____ G_____	Vocal Music	_____
Football	_____	Dramatics	_____
Volleyball	_____	Cheerleading	_____
Wrestling	_____	Journalism	_____
Other	_____	Speech	_____
Specify Other	_____		

HONORS, ACTIVITIES, RELATED EXPERIENCES

Please list any activities, honors, volunteer work and/or other information that you believe will assist in arriving at a true estimate of your qualifications.

NOTICE OF NONDISCRIMINATION

It is the policy of the Osceola Public Schools not to discriminate on the basis of race, color, national origin, sex or orientation, age, disability, religion, or marital status in its educational programs, activities, or employment policies as required by Title VI, Title IX & Section 504. EOE/AA

DATA

Present Salary _____ Expected Salary _____
 Are you now under contract? _____ Where? _____
 Can you obtain a release? _____ When could you begin work here? _____
 Could you come for an interview? _____ When? _____
 How long would you plan to work in Osceola? _____
 Have you military obligations? _____ How will you meet them? _____

REFERENCES

Please list the names of three persons who know your professional work and qualifications.

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

Have you ever been convicted of a crime? _____

Information provided by you in this part WILL NOT automatically bar you from employment with Osceola Public Schools, but will be considered in view of all relevant circumstances.

If yes, please provide details including the type of crime, court indicted in and date of conviction.

To be an employee of the Osceola Public Schools, you must be a citizen of the United States or have authorization from the Immigration and Naturalization Service to work. Are you a United States citizen? _____ Yes _____ No **If no**, do you have Employment Authorization? _____ Yes _____ No

My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for substitution. This investigation may include such information as criminal or civic convictions, driving records, previous employers and educational institutions, personal references, and other appropriate sources. I waive my right of access to any such information or any liability with its release or use.

Furthermore, 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, and I understand that any omission, falsification or misrepresentation made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Signed

Date

Please respond to the questions below. Limit your comments to the space provided.

1 Why do/did you want to become a teacher?

2 What have you found to be the most effective ways to motivate students?

3 Do you think it is possible for students to become independent learners? If yes, what strategies do you use to make this happen?

4 How important is it for all students to demonstrate to you their understanding of the content of your lessons? What strategies do you include in your lessons to ensure all students communicate their lesson understanding?

5 How would you respond to the following? A teacher tells you “I hate to leave teaching because I’ve always loved my subject matter, but I can’t make enough money to raise my family.”

6 Describe any specialized training or experiences you have had that enhance you as a candidate.

7 Describe your training or experiences in assessment and your familiarity with the Nebraska State Standards and the NeSA testing program.

8 Use this space in any way you wish to support your candidacy. You may want to give information about your particular experience or qualifications, abilities, ambitions, or teaching philosophy.