

Please return this form to
the Board Office either by
fax or to the address shown



Satanta Unified School District #507

100 Caddo Street, PO Box 279

Satanta, KS 67870

Phone: 620-649-2234 Fax: 620-649-2668

Date _____ SSN# _____

Name _____
Last First Middle

Mailing Address City State Zip

Home phone # Cell phone # Email address

Position you are applying for: _____

Provide the name of a person best able to locate you when necessary:

Name Address Phone #

When will you be available for work? _____

Give condition of health for the past two years: _____

During the last year, how many days of work have you missed due to illness? _____

List any special strengths, talents, and/or unique qualities you possess which might be
useful in your employment:

Have you ever been released from a job? _____ Yes _____ No

List any position from which you have been dismissed or 'forced' to resign:

List any convictions for violations of the law other than minor traffic violations:

(If you would like, attach any information or explanation to the previous two questions)

Educational Information:

Please list most recent education first, including High School or GED

School	Dates Attended	Degree received
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Work Experience:

Employer	Position & type of work	Employment dates
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References:

Please include your last supervisor

Name	Address	Telephone #	Position
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Application
Job Application
Acknowledgements

1. 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.
2. 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.
3. I authorize USD 507 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.
4. 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

All job offers, regardless of position or who may have made the offer, are tentative until the USD 507 Board of Education acts on the administration's recommendation.

An Equal Employment/Educational Opportunity Agency

USD #507 does not discriminate on the basis of sex, race, color, national origin, handicap, or age in admission or access to, or treatment or employment, its programs or activities. Any questions regarding the Board's compliance with Title VI, Title IX or Section 504 of the IDEA or ADA may be directed to the Compliance Officer, who can be reached at (620) 649-2234, 100 Caddo Street, PO Box 279, Satanta, KS 67870 or the Assistant Secretary for Civil Rights, US Department of Education, Washington, D.C.

USD 507 Classified Application