



Bethune School District R-5

SHILA ADOLF, Superintendent
145 W. 3rd Ave., P. O. Box 127
BETHUNE, CO 80805
719-346-7513



SCOTT POWELL
President
ERIC ZIEGLER
Vice President
LEE EINSPAHR
Board Member

MARY ANN HARREL
Board Member
SHAWNA CALHOON
BOCES

Thank you for your interest in our school. I have enclosed an application for the Bethune School District. To be considered a candidate, you need to submit a complete application. A complete application includes the following:

1. Letter of intent stating that you are interested in the position
2. A completed application
3. Three letters of recommendation
4. Your resume
5. College transcripts
6. Copy of teaching license or documentation that licensure is in process

Looking forward to hearing from you,

Shila J. Adolf
Superintendent

BETHUNE

PUBLIC SCHOOLS

P.O. Box 127
Bethune, Colorado 80805
(719) 346-7513

APPLICATION FOR CERTIFICATED EMPLOYMENT

Dr.
Mr.
Mrs.
Miss
Ms.

LAST

FIRST

MIDDLE

Date

Position Desired (*First Preference Only*)

GRADE LEVEL AND/OR SUBJECT

An Equal Opportunity Employer

IMPORTANT: Before final consideration for employment, the candidate must have on file in the personnel office a complete set of transcripts and a placement file. It is the candidate's responsibility to see that the transcripts and placement files are provided. A screening interview is also required. Out-of-state candidates should write to the Colorado Department of Education, 201 E. Colfax Ave., Denver, CO 80203, regarding certification. CDE phone (303) 866-6628. All applicants must qualify for Colorado certification prior to employment.

This district does not discriminate on the basis of age, race, color, religion, sex, marital status, handicap, or national origin.

**BOTH MALE AND FEMALE ARE
URGED TO APPLY.**

FOR OFFICE USE ONLY

R _____
T _____
3L _____
L _____

PERSONAL DATA (Please type or print)

1. Name _____
 3. Other names used _____
 4. Home mailing address: _____
 Street _____
 City _____ State _____
 Zip _____ Phone _____

2. Social Security No. _____
 Dates of usage _____
 5. Business mailing address: _____
 Street _____
 City _____ State _____
 Zip _____ Phone _____

MESSAGE PHONE(S)

6. POSITION DESIRED:

ELEMENTARY: (Grades K-4) List in order of preference.

1. _____ 2. _____ 3. _____ 4. _____

MIDDLE SCHOOL: (Grades 5-8, either elementary or secondary endorsement)

1. _____ HOURS 2. _____ HOURS 3. _____ HOURS

HIGH SCHOOL (Grades 9-12): List subject area preferences and total semester hours acquired in each area.

1. _____ HOURS 2. _____ HOURS 3. _____ HOURS

7. When will you be available? _____

8. Present Position _____ Salary \$ _____

9. Reason for leaving present position _____

10. Present (or most recent) administrative supervisor (s):

11. Have you ever been dismissed or asked to resign from a position? (Please check) Yes No

If yes, explain: _____

12. Have you ever resigned rather than face disciplinary action and/or nonrenewal by an employer and/or disciplinary action against a license/certificate? (Please check) Yes No

If yes, explain: _____

CERTIFICATION

13. Colorado certificates now held: (Candidates are responsible for obtaining proper certification.) Submit photocopy of certificate at earliest date possible.

CERTIFICATES	EXPIRATION DATE

EDUCATIONAL PREPARATION ("See resume" is not sufficient)

14. School(s) attended:

NAME OF SCHOOL	LOCATION	NUMBER OF YEARS ATTENDED	DATES	GRADUATION	
				YEAR	DEGREE
HIGH SCHOOL					
UNDERGRADUATE					
GRADUATE					
GRADUATE					

Highest degree earned: _____ Graduate semester hours after highest degree: _____

Undergraduate major: _____ G.P.A. _____ Undergraduate minor: _____ G.P.A. _____

Graduate degree(s) in: _____ G.P.A. _____ G.P.A. _____

College activities in which you participated _____

STUDENT TEACHING EXPERIENCE:

15. Assignment and location:

NAME OF SCHOOL	LOCATION		GRADES OR SUBJECTS TAUGHT	DATES	COOPERATING TEACHER
	CITY	STATE			

WORK EXPERIENCE

16. CONTRACTUAL TEACHING ONLY: List most recent experience first. DO NOT list substitute teaching experience. ("See resume" is not sufficient.)

NAME & TYPE OF SCHOOL (Elem./Jr. High/Sr. High/Etc.)	COMPLETE ADDRESS (list street, city, state, zip)	GRADE(S) OR SUBJECT(S) TAUGHT	NO. YEARS	DATES		REASON FOR LEAVING
				Beginning	Ending	

(List additional years on separate sheet)

17. OTHER WORK EXPERIENCE: List most recent experience first. (Include substitute teaching here.)

EMPLOYER	LOCATION	NATURE OF WORK	DATES

ACTIVITIES AND ABILITIES

18. Describe your special abilities or talents (e.g., sports, drama, etc.) _____

19. Activities you are able and interested in sponsoring/coaching: _____

PERSONAL INFORMATION REFERENCES:

20. Give names and complete addresses of at least three references who are familiar with your personality, character and work performance.

NAME	YEARS KNOWN	OFFICIAL POSITION	ADDRESS			
			STREET	CITY	STATE	PHONE

PHILOSOPHY OF EDUCATION AND ADDITIONAL INFORMATION (Answer two in longhand.)

- 21. Provide a concise statement of your philosophy of education.
- 22. Concisely highlight the major contribution you will make to our children.
- 23. Present any additional information regarding your abilities not dealt with earlier.
(Additional information may be listed on separate sheet.)

CERTIFICATION AND RELEASE

I certify that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of fact called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the school and/or its agents including consumer reporting bureaus to verify any of this information by searching appropriate information and record sources. I authorize all employers, persons, schools, companies, law enforcement authorities, and state agencies to release any information concerning my background and hereby release those parties from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. If school policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to being offered a position and/or during employment.

SIGNATURE	DATE
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