

Fayette R-III School District
705 Lucky Street
Fayette, MO 65248
(660)248-2153

ADMINISTRATOR APPLICATION

Personal Data:

Name _____

Address _____

Telephone _____ E-Mail _____

Social Security Number _____

Teacher Retirement Number _____

Position Sought: Elementary Principal _____
Middle School Principal _____
High School Principal _____
Superintendent _____

Hobbies, Special Interests _____

Personal Attributes: Please list personal attributes, which you feel would help assure your success in this position.

Highest Degree Held: _____

Colleges/University Attended: (Please list most recent first)

_____	Degree _____	Dates _____
_____	Degree _____	Dates _____
_____	Degree _____	Dates _____
_____	Degree _____	Dates _____

Total Undergraduate Hours _____

Total Graduate Hours _____

Area(s) of Administrative Certification: _____

Please write a brief response to the following questions:

1. What, in your opinion, is the most exciting thing happening in education today?

2. Cite an experience that you have had in education, which was not completely successful. In retrospect, what changes would you have made to assure success?

3. Explain your philosophy on the following:

A. Teacher/Principal Relationships.

B. Student/Principal Relationships.

C. Discipline.

D. Principal as an instructional leader.

4. What would you do to foster strong parent involvement in the school?

Teaching Experience: (Most recent experience first)
Total Years Teaching Experience _____

School District: _____
From _____ **to** _____ **Subject(s) taught:** _____
Reason for leaving: _____

School District: _____
From _____ **to** _____ **Subject(s) taught:** _____
Reason for leaving: _____

School District: _____
From _____ **to** _____ **Subject(s) taught:** _____
Reason for leaving: _____

Administrator Experience: (Most recent experience first)
Total Years Administrative Experience _____

School District: _____
From _____ **to** _____ **Position:** _____
Reason for leaving: _____

School District: _____
From _____ **to** _____ **Position:** _____
Reason for leaving: _____

School District: _____
From _____ **to** _____ **Position:** _____
Reason for leaving: _____

References:

(Name) _____ **(Position)** _____

(Address) _____ **(Telephone)** _____

(Name) _____ **(Position)** _____

(Address) _____ **(Telephone)** _____

(Name) _____ **(Position)** _____

(Address) _____ **(Telephone)** _____

I hereby authorize the Fayette R-III School District to contact all persons and entities listed on this application and to make all other contacts, inquiries, and investigations that the District deems necessary to verify my education, employment, criminal and child abuse history, including but not limited to contacting current and/or past employers, educational institutions, law enforcement, and child abuse agencies. I hereby consent to the release of any such information by third persons and I understand that the Fayette R-III School District will keep such information in a confidential file, available only to appropriate District officials.

I hereby certify that all the information provided by me in connection with this application is true, accurate, and complete. I understand that any false, inaccurate, incomplete, omitted, or misleading information provided on this application, or any other documents submitted in connection with this application, shall be cause for refusal to hire, or if applicant has been hired, for immediate termination.

Signature of Applicant _____ Date _____

EQUAL OPPORTUNITY EMPLOYER

It is the policy of the Fayette School District to provide equal opportunities for employment, promotion, and education without regard to sex, age, color, creed, national origin and/or handicap.