

**Aguilar School District Re-6**

**Application**

Date of Application \_\_\_\_\_

Certified       Principal       Non-certified       Aide  
 Teacher       Substitute       Cook  
 Janitor/Bus Driver  
 Clerical

**I. PERSONAL**

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last First Middle

Home Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

In what language are your fluent? \_\_\_\_\_

Driver's License \_\_\_\_\_ Birth Date \_\_\_\_\_  
State Number Month Day Year

- All Correspondence will be sent to the above home address unless otherwise stated.

**II. COLORADO LICENSES**

Administrative  Yes  No Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Teacher  Yes  No Endorsements \_\_\_\_\_  
Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Substitute  Yes  No Endorsements \_\_\_\_\_  
Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Other  Yes  No Endorsements \_\_\_\_\_  
Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

- ATTACH A COPY OF EACH LICENSE

**III. EDUCATION**

College Name/ Location	Dates Attended	Credits	Major Field	Minor Field	Degree

**IV. WORK EXPERIENCE**

List in reverse chronological order all administrative, teaching and other employment experience.

School/Employer	Assignment/Duty	Date: Mo/Yr	Name, Address Phone# of Supervisor	Reason for leaving
-----------------	-----------------	-------------	---------------------------------------	--------------------

---

---

---

---

---

**REFERENCES: List five references, other than those mentioned above or in placement file, who are qualified to speak to your fitness for this position.**

Name	Address	Phone No.	Association with Applicant
------	---------	-----------	----------------------------

---

---

---

---

---

**V. BACKGROUND CHECK**

In addition to the following information, a thorough background check will be conducted as required by state law.

- a. Have you ever been convicted of a felony, pleaded nolo cotendere or received probation for any offence involving moral turpitude? (Moral turpitude includes but is not limited to such offenses as theft, attempted theft, murder, rape, embezzlement and indecency with a minor.)

\_\_\_\_ Yes    \_\_\_\_ No

If yes, state here (A) the nature of the offense, (B) the date of the conviction, (C) the name and address of the court and, (D) other pertinent details. \*

---

---

---

\*Conviction of a crime is not an automatic bar to employment. The District will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

- b. Have you ever been involuntarily terminated or asked to resign from the employment of another school district? \_\_\_\_ Yes \_\_\_\_ No.

If yes, please give the name of the district, the date and the reasons for the termination or request for resignation.

---

---

---

c. Have you ever reached a mutual decision with an employing school board to vacate a contract prior to its expiration?

\_\_\_ Yes                      \_\_\_ No.

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

d. Are you aware of any reason you would not be able to perform the duties of the positions for which you are making this application?

\_\_\_ Yes                      \_\_\_ No

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_

e. Condition of Health \_\_\_\_\_ Do you have any impairments, physical, mental, or medical which interfere with your ability to perform the job for which you are applying? \_\_\_\_\_

\* Please include a resume and any other information or materials that you feel will give credit to your qualities. Such material and this application will not be returned to you. Applications will be kept on file for one year. This application, when completed should be returned to:

Superintendent of Schools/Human Resource Department  
P. O. Box 567  
Aguilar, CO 81020

\*Successful candidates must possess a valid Colorado Certificate before a contract is valid. New employees automatically become members of the Public Employee's Retirement Association of Colorado, and your name, address and social security number will be reported to Child Support Enforcement.

\*It is expected that applications and other supportive material will be received on or before application deadline.

\*Applicants are asked not to contact Board of Education except as otherwise requested to do so.

**AGREEMENT**

I hereby certify that all statements made on this application are true accurate and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of the application or termination of employment. I hereby authorize the District to conduct work, history and personal reference checks to verify statements on this application form and other material provided as part of my application for this position.

Signature

Date

**AN EQUAL OPPORTUNITY EMPLOYER. Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status or the presence of non-job-related medical conditions or disability.**