

ESMERALDA COUNTY SCHOOL DISTRICT

REASONABLE ACCOMMODATION* If you believe you require reasonable accommodation in the employment process, please contact the District office at (775) 572-3250. Esmeralda County School District may require pre-employment drug testing. Candidates must *successfully* complete any required *pre - employment drug testing* and background checks.

Superintendent Employment Application

Contact Information:	Winifred Wood, Business Manager P.O. Box 129 Dyer, NV 89010	Phone: (775) 572-3250 FAX: (775) 572-3310 Email: finance1@esmeralda.k12.nv.us
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APPLICANT INFORMATION							
Last Name		First		Middle:			
Mailing Address					Apartment/Unit #		
City			State			ZIP	
Home Phone			Work Phone				
Cell Phone			E-mail Address				
Date Available						Desired Salary	
Other names for transcripts or references might be identified:							
Are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Have you ever worked for Esmeralda School District?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				

EDUCATION & PROFESSIONAL TRAINING *Please list all educational institutions attended, listing the most recent institution first. Attach additional sheet if necessary. It is the applicant's responsibility to provide a copy of official transcripts with application. Original transcripts of all colleges and university work are required before contract can be issued.*

FROM – TO		Name of Institution	LOCATION		SEMESTER/ QTR Hours	DEGREE/ DIPLOMA	MAJOR(s)/ MINOR(s)
Mo/Yr	Mo/Yr		City	State			

PROFESSIONAL REFERENCES (MUST BE TYPED)

Applicant must submit five (3) professional reference letters with application.

NAME	OFFICIAL POSITION	LETTER INCLUDED	COMPLETE MAILING ADDRESS AND TELEPHONE NUMBER

ESMERALDA COUNTY SCHOOL DISTRICT

CERTIFICATION: Current Nevada licensure as an administrator is required. Please attaché a copy.

Do you hold a valid administrator's license in another state? No_____ Yes_____ If yes, what state? _____

Language Ability: (Specify) Fluent in: _____

Conversant in other than English: _____

Can read with understanding in: _____

ADMINISTRATIVE EMPLOYMENT AND/OR EXPERIENCE

List quasi/administrative and/or administrative experience related to the superintendent position. List in chronological order, beginning with most recent.

FROM - TO		JOB TITLE	FULL or PART TIME	LOCATION		NAME AND TITLE OF PERSON RESPONSIBLE FOR EVALUATION
Mo/Yr	Mo/Yr			City	State	

Breaks in service must be explained. Please submit an attached sheet if necessary

ADDITIONAL INFORMATION:

Have you ever been convicted of a misdemeanor (other than a minor traffic infraction), gross misdemeanor or a felony? Yes_____ No_____

Have you ever been convicted of a sex offense? Yes_____ No_____

Have you been convicted of, pled guilty or nolo contrende to, or been granted deferred adjudication for a felony oR any lesser crime which may be directly related to your qualification for this job? Yes_____ No_____

IF YOU ANSWERED YES TO ANY OF THE ABOVE THREE QUESTIONS, YOU MUST INCLUDE CONFIDENTIAL LETTER EXPLAINING THE SITUATION. *NOTE: Existence of a criminal record does not constitute an automatic bar to employment.*

TEACHING EXPERIENCE

List in chronological order, beginning with most recent.

FROM - TO		SUBJECT/ GRADE TAUGHT	FULL or PART TIME	LOCATION		NAME AND TITLE OF PERSON RESPONSIBLE FOR EVALUATION
Mo/Yr	Mo/Yr			City	State	

Breaks in service must be explained. Please submit an attached sheet if necessary

ESMERALDA COUNTY SCHOOL DISTRICT

ORIGINAL STATEMENT: (Attach additional sheet(s) if necessary)

Must be completed by each applicant. Please provide a brief statement explaining why you chose to enter the education profession.

What else would you like to tell us about yourself?

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature		Date	
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This document is five pages. All five pages must be filled out and returned. It must be accompanied with the following:
Letter of Intent
Sealed Transcripts
Valid Nevada Administrator License or Administrator License from other State
Resume
Professional Reference Letters

ESMERALDA COUNTY SCHOOL DISTRICT

NAME: _____

DATE: _____

THIS APPLICATION IS NOT A CONTRACT OR OFFER OF EMPLOYMENT

Please read the following four paragraphs and INITIAL each, to indicate you have read and understood each of the statements. If you have any questions, contact Esmeralda County School District at (775) 572-3250.

I understand any false statements or misrepresentation of facts are grounds for dismissal or removal of consideration for employment. I hereby certify that the statements above are true and correct to the best of my knowledge and belief. I waive the right to hold liable those persons whose names appear on the application form. I understand that before any contract becomes effective or compensation is possible, I must personally obtain the information required for compliance with the Immigration Reform and Control Act of 1986 as well as the basic requirements and standards for licensors in the State of Nevada. The license must be filed with the District office. I further understand that if I am considered for employment with the Esmeralda County School District and am related to a current member of the Board of School Trustees, Nevada law requires that such a relationship be reported prior to hiring. I have never been released from a teaching or administrator position nor have I been asked to resign for any reason. (In the event that applicant has been released or asked to resign, an explanation should be attached to the application.) *Initials:* _____

I authorize the Esmeralda County School District or its designated representative to request any information in writing or orally from my previous employers and professional references; I agree that all such information provided will remain confidential and unavailable for my review and I agree to hold the Esmeralda County School District and its employees, as well as my previous employers and professional references, harmless as to any information provided. *Initials:* _____

The Esmeralda County School District supports and is committed to comply with the provisions of the Americans with Disabilities Act (ADA). Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation? *Initials:* _____

I understand that I may be subject to drug testing, a routine physical, and a DMV (driver's motor vehicle) records check prior to entering into a formal contract for employment. *Initials:* _____

I further understand this consent will apply during the entire course of my employment with Esmeralda County School District should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely. *Initials:* _____

Signature of Applicant

DATE: _____

This document is five pages. All five pages must be filled out and returned. It must be accompanied with the following:
Letter of Intent
Sealed Transcripts
Valid Nevada Administrator License
Resume
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ESMERALDA COUNTY SCHOOL DISTRICT

Disclosure Authorization & Release Form

I, _____ (print name), authorize Esmeralda County School District to contact any employer or individual that I have listed on my employment application and/or resume or mentioned during job interviews, or other individuals with knowledge of my education and/or experience, and to obtain from them any relevant information regarding my previous employment, education, certificates, licenses, military service, criminal history, characteristics or traits, or other qualification for employment with Esmeralda County School District.

In exchange for Esmeralda County School District's consideration of my employment application, I authorize anyone possessing this information to furnish it to Esmeralda County School District upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including Esmeralda County School District, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

I further understand this consent will apply during the entire course of my employment with Esmeralda County School District should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely. *Initials:* _____

Name (print)

Name (sign)

Date

Notification of Meeting Waiver

I hereby agree to waive my right to 21 days notification of the meeting of the Esmeralda County School District Board of Trustees at which meeting the Board will consider my character, alleged misconduct, competence, and/or health in relation to my application for appointment to the position of Superintendent of Schools for the Esmeralda County School District. This waiver is given voluntarily. I understand my statutory rights, and it is my intent to relinquish those rights.

Signed: _____

Dated: _____, 2015

Printed Name of Applicant: _____

This document is five pages. All five pages must be filled out and returned. It must be accompanied with the following:
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Resume
Professional Reference Letters