

Superintendent of Schools Application

Applicant Information

Full Name:

Address:	
Phone:	
Email:	
Resume and R Please submit a current resume, listing your work your application. Additionally, three confidential, pl be emailed directly to USBA Executive Direct	k history and other relevant experience, with rofessional letters of recommendation should
Educat Please list your education. Include all university/co training. Please include any ac	llege degrees and any post-secondary school
Educational Institution: Graduation Year: Major/Educational subject area: Minor:	Degree:
Educational Institution: Graduation Year: Major/Educational subject area: Minor:	Degree:
Educational Institution: Graduation Year: Major/Educational subject area: Minor:	Degree:

Educator License/s

License Area: Endorsement: License Number: Effective Date:	Expiration Date:
License Area: Endorsement: License Number: Effective Date:	Expiration Date:
License Area: Endorsement: License Number: Effective Date:	Expiration Date:
Extracurricular/Volu Please list any extracurricular, volunteer, or other	
Activity: Explanation: Experience/Number of Years:	
Activity: Explanation: Experience/Number of Years:	
Activity: Explanation: Experience/Number of Years:	

Related Employees

Do you have any relatives presently working for the Provo City School District? (For the purpose of this application, relatives include parents, spouse, son, daughter, sister, brother, uncle, aunt, nephew, niece, mother-in-law, or father-in-law.)

Yes

No

If yes, please list name/s, relationship, and their assignment at the district:

Additional Information

Are you a citizen of the United States? Yes No If not, are you authorized to work in the U.S.?

Have you ever worked for Provo City School District? Yes No If yes, when?

Have you ever been convicted of a felony? Yes No

Have you ever been discharged or requested to resign from a former position?

Yes No

If yes, explain:

Have you ever been suspended or terminated? Yes No If yes, explain:

Disability

It is the policy of the Provo City School District that there will be no discrimination or harassment on the grounds of race and/or ethnicity, color, sex, marital status, religion, sexual orientation, national origin, age, or disability in any educational program, activity, or employment.

Are you able to perform the functions of this job with or without reasonable accommodations?

Yes

No

Acknowledgment

I certify that all of the above information provided in the application is true and complete. I further agree that if I have provided false, misleading, or incomplete information, the District may disqualify me as an applicant or terminate my employment immediately. I understand that this application and records become the property of the District.

I authorize Provo City School District to inquire with former employers and/or references and to obtain any and all information regarding my job-related background and qualifications and information regarding any employment action taken or discipline imposed for the physical abuse or sexual abuse of a child or student, as required by Utah Code 53A-6-401. I release and waive Provo City School District, my former employers, and all references from any and all liability in obtaining such information. I also recognize that in accordance with Utah State Law, the District may conduct a criminal background check and I hereby waive my right to further written notice of such.

I understand that if employed, the employment is temporary pending completion of all required documents and the outcome of history and background check investigations. If I am presently charged or under indictment for a criminal offense, upon a finding or plea of guilty I shall provide

that	information	to	Provo	City	School	District.	I	further	agree	to	observe	all	the	rules
regu	lations, and p	olic	ies of th	ne Dis	trict.									

I acknowledge that I have carefully read and understand this authorization to conduct a background and reference check. I am knowingly and voluntarily signing this authorization with the understanding that doing so affects my legal rights.

I acknowledge reading the above.	Yes	No	No			
Signature:		Date:				
Signature		Date				