



## SUPERINTENDENT APPLICATION PARK CITY SCHOOL DISTRICT

2700 KEARNS BLVD. · PARK CITY · UTAH · 84060 · 435-645-5600

### A. PERSONAL INFORMATION:

DATE: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Street or PO Box

Cell Phone: \_\_\_\_\_

City State Zip Code Work Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### B. EDUCATIONAL PREPARATION:

Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Degree: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Honors: \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Degree: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Honors: \_\_\_\_\_

**EDUCATIONAL PREPARATION CONT'D:**

Institution: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Degree: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Honors: \_\_\_\_\_

**C. LICENSE INFORMATION:**

Type of License(s): \_\_\_\_\_

Effective Date: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Additional License Information: \_\_\_\_\_

**D. PROFESSIONAL EXPERIENCE:**

(Please list Teaching, Administrative and other Professional Assignments.)

District/Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

District/Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

**PROFESSIONAL EXPERIENCE CONT'D:**

District/Employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

**E. LIST THREE PROFESSIONAL REFERENCES:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position or Occupation: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position or Occupation: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Street or PO Box City State Zip Code

Position or Occupation: \_\_\_\_\_

**F. ARE YOU RELATED TO ANY CURRENT PARK CITY SCHOOL DISTRICT EMPLOYEE(S):**

Yes No If yes, provide the employee(s) name(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**G. PLEASE INITIAL YOUR RESPONSE TO EACH OF THE FOLLOWING:**

- |     |    |   |
|-----|----|---|
| Yes | No | 1. Have you ever (1) forfeited bail, or been (2) convicted (3) fined (4) jailed (5) arrested/charged with, or (6) placed on probation for any violation of law other than minor traffic offenses? |
| Yes | No | 2. Have you ever had a certificate or license revoked or suspended?   |
| Yes | No | 3. Have you ever been released from a contract, reassigned to avoid termination or disciplinary action, suspended, or placed on leave with or without pay?  |

If you answered “Yes” to any of these questions, explain in an attached letter.

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

I authorize Park City School District to make such investigations and inquiries of my personal employment and other matters as deemed necessary in arriving at an employment decision. I hereby release persons giving information of past employment experiences from all liability in responding to inquiries in connection with my application. This is to include any request for human resource files from past employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) will result in disciplinary action, which may include termination.

In accordance with Utah State Law, Park City School District will conduct a criminal background check (including fingerprinting), and I hereby waive my rights to further written notice of such.

_____	_____
Applicant Signature	Date

**H. ADDITIONAL INFORMATION:**

(Refers to the appropriate sections A-G above for each comment made) NOTE: Many times individuals have many hours of schooling outside their minor or major or have a block of training (like foreign language, special education, vocational education, computer technology, etc.). Please list them below. Please list any other additional information.

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## **I. INSTRUCTIONS FOR MAKING APPLICATION:**

A complete application includes the following items:

1. Formal letter of Interest outlining (in 1,000 words maximum):
  - (a) Personal philosophy of education, management and leadership.
  - (b) Special competencies related to the superintendency.
  - (c) Why do you have an interest in this particular position?
2. Three recent letters of recommendation.
3. University transcripts.
4. Credential verification materials.
5. Written response to the following questions:
  - (a) Describe your process in dealing with conflict.
  - (b) Identify how you would establish effective communication and working relationships with the community.
6. Successful applicants will receive an in-person interview.

**Please address inquiries and application materials to:**

**Todd Hauber, Business Administrator**  
**Park City School District**  
**2700 Kearns Blvd.**  
**Park City, UT 84060**  
**E-mail: [thauber@pcschoools.us](mailto:thauber@pcschoools.us)**  
**Phone: (435) 645-5600, Ext. 1426**  
**Fax: (435) 645-5608**