



APPLICATION FORM

Professional Employment

LEROY-GRIDLEY USD #245

LEROY, KANSAS 66857

Please Type or Print

Name _____

(Last)

(First)

(Middle)

Professional Address _____

Phone _____ - _____ - _____

Home Address _____

Phone _____ - _____ - _____

Email _____ Cell _____ - _____ - _____

Date Application Submitted _____

Please forward all required application materials to:

Roxi Newkirk, Clerk of the Board

Unified School District No.245

P.O. Box 278

LeRoy, KS 66857

USD #245 IS AN EQUAL OPPORTUNITY EMPLOYER

1. Current Employment _____

2. Are you now under contract? _____

3. If so, when do your contractual obligations expire? _____

4. Are you now licensed to be a Teacher in Kansas? _____

a. If not Licensed in Kansas, but in another state:

Which State _____

Issue date _____ and expiration date _____

Kind of license _____

5. Chronological Educational Employment (Most recent listed first)

School Name	Location	District Enrollment	Position	Dates of Employment

6. Professional Memberships Relevant to Position:

7. Education in Chronological Order (most recent listed first)

School attended & Location	Inclusive Dates	Degree	Major Field	Minor Field

8. Professional Honors and Activities

9. REFERENCES

Name	Position	Address	First Phone	Second Phone

10. Is it permissible to contact any or all of the above references? _____

11. If no, after what date would contact be permissible? _____