



School Administrator Application

SCHOOL ADMINISTRATOR APPLICATION PACKET CHECKLIST:

(Please submit ALL documentation as electronic attachments, in ONE e-mail, to: paulette.takata@canyonsdistrict.org)

- School Administrator Application *(Save and submit your application using the following format: Wilcox, Amy 2018.10.17)*
- A copy of your CURRENT Professional Educator License
- A signed letter from your university stating you'll be recommended for Administrative Licensure prior to September 1, 2019, qualifying you to work during the 2019-2020 school year. *(Only if applicable)*
- Resume/Vita *(Include ALL related work experience)*
- Letters of Recommendation *(Please attach three (3) signed Letters of Recommendations)*

*To access "Help Prompts" while filling out the School Administrator Application, push the "F1" key, when in a grayed data field.
To access data fields either "Tab" to the desired field or "Highlight" the grayed data field box.*

PERSONAL CONTACT:

Name: As it appears on Social Security Card

Home Telephone Number: Include area code

Preferred Name: What name do you preferred to be called?

Cell Telephone number: Include area code

Current Address: Current Address

Alternative Telephone Number: Include area code

City: City

State: State

Zip: Zip Code

Email Address: Email Address

BACKGROUND:

Do you have the legal right to work in the United States?

Yes No

(Proof of citizenship or immigration status must be submitted when hired.
If you do not have a current INS Authorization, employment will not be offered.)

Have you ever:

a. been convicted of a violation of law other than a minor traffic violation?

Yes No

b. pleaded guilty and had your guilty plea held in abeyance in a criminal proceeding?

Yes No

c. been placed on probation in conjunction with a criminal charge or conviction?

Yes No

Are any criminal charges or proceedings pending against you?

Yes No

If you have answered yes to any of the above, provide a statement explaining the circumstances.

Explanation

Have you ever been refused tenure, non-renewed, suspended, or terminated?

Yes No

Have you ever had any action, sanction, or discipline taken against your professional educator license or are you currently under investigation?

Yes No

If you have answered yes to any of the above, provide a statement explaining the circumstances.

Explanation

Reference Check Release

Yes No

Pursuant to Utah State Law 53A-15-1511 and 34-42-1, by selecting "Yes" on this question I authorize Canyons School District to contact current and previous employers and authorize them to disclose information regarding any employment action taken or discipline imposed against me for the physical abuse or sexual abuse of a child or student as well as information about my job performance, professional conduct or evaluations.

I understand that if an LEA (Local Education Agency) or other employer in good faith discloses information that is within the scope of this release, the LEA or other employer is immune from civil and/or criminal liability based upon the applicable law. I acknowledge that by not marking "Yes" on this question, I cannot be considered for employment with Canyons School District.

Have you retired from the Utah State Retirement System? If Yes, when did you retire: Date Retired from URS No

Do you have any relatives employed by Canyons School District? Yes No

Generally, immediate family members of current employees are not eligible to work at the same school or department, except in certain circumstances. We try to avoid any possible conflicts of interest.

If Yes, who? **Name of relative**

Where? **Location of relative**

POSITION PREFERENCE

Rank order, 1st being most desired, your preferred position(s) for which you are currently qualified:

Rank	Asst. Principal – Elementary	Rank	Asst. Principal – Middle	Rank	Asst. Principal - High
Rank	Principal – Elementary	Rank	Principal – Middle	Rank	Principal - High

LICENSURE:

Do you hold a current Utah Professional Educator License? Yes No

If No, when will you apply or be recommended for Utah licensure?

Month Year

What "Licensed Area(s) of Concentration" are or will be listed on your license?

Area of Concentration
Area of Concentration
Area of Concentration

What "Endorsements" are or will be listed on your license?

Endorsement
Endorsement
Endorsement

Do you hold a current Professional Educator License in another state? Yes No

What state(s) are you currently licensed in?

State Name
State Name

EDUCATION: (Most recent degree first)

Institution & Location	Graduated	Degree	Major	Minor
Institution-Location	Yes/No	Degree	Major	Minor
Institution-Location	Yes/No	Degree	Major	Minor
Institution-Location	Yes/No	Degree	Major	Minor
Institution-Location	Yes/No	Degree	Major	Minor

MULTILINGUAL ABILITIES: Indicate any languages other than English that you can speak, read, and/or write:

	Language #1	Language #2	Language #3
Speak	Proficiency Rating	Proficiency Rating	Proficiency Rating
Read	Proficiency Rating	Proficiency Rating	Proficiency Rating
Write	Proficiency Rating	Proficiency Rating	Proficiency Rating



EDUCATIONAL WORK EXPERIENCE:

List the number of contractual years of EDUCATIONAL WORK EXPERIENCE in the following areas:

Elementary School

Teacher # of Years Worked
 Counselor/Psychologist # of Years Worked
 Administrative Intern # of Years Worked
 Asst. Principal # of Years Worked
 Principal # of Years Worked

High School

Teacher # of Years Worked
 Counselor/Psychologist # of Years Worked
 Administrative Intern # of Years Worked
 Asst. Principal # of Years Worked
 Principal # of Years Worked

Middle School

Teacher # of Years Worked
 Counselor/Psychologist # of Years Worked
 Administrative Intern # of Years Worked
 Asst. Principal # of Years Worked
 Principal # of Years Worked

District Office/Other

Position Held - Other # of Years Worked
 Position Held - Other # of Years Worked
 Position Held - Other # of Years Worked
 Position Held - Other # of Years Worked
 Position Held - Other # of Years Worked

CURRENT EMPLOYMENT:

Current Employer: Place of current employment

Your current position: Current Position

Immediate Supervisor: Name of immediate Supervisor

Supervisor Contact #1: Supervisor's Work Number

Supervisor Contact #2: Supervisor's Cell Number

When may we contact your current employer for reference?

- Upon submitting application
- After the screening interview

REFERENCES

List five (5) references who know your professional abilities and personal character (do not include relatives):

Name	Relation to Applicant	Cell Phone	Work Phone	E-Mail Address
Name of Reference Reference's Employer	Relationship	Cell Number	Work Number	E-mail Address
Name of Reference Reference's Employer	Relationship	Cell Number	Work Number	E-mail Address
Name of Reference Reference's Employer	Relationship	Cell Number	Work Number	E-mail Address
Name of Reference Reference's Employer	Relationship	Cell Number	Work Number	E-mail Address
Name of Reference Reference's Employer	Relationship	Cell Number	Work Number	E-mail Address

WRITTEN RESPONSE:

Please respond to the following question. Written response must be written, edited and read only by the applying candidate. Response may not exceed 250 words per question.

How would you promote equity, tolerance, and respect among all members and groups comprising the school community?

Written Response #1

Agreement: By submitting this School Administrator Application Packet I certify that all the information I have provided is correct and complete to the best of my knowledge. I understand that providing false or misleading information on this or other employment documents, including health insurance applications, will disqualify my application and provide sufficient grounds for my dismissal should I be hired.

I certify that the written response included in this application was written, edited and read only by me.

I hereby authorize Canyons School District to conduct an investigation of my background, including a criminal background check in accordance with Utah State Law, and authorize release of information in connection with the application by former employers and supervisors. I further agree to indemnify and hold harmless these former employers and supervisors for any action initiated in conjunction with their release of this information.

Applicant Signature: Type name or sign name

Date: Today's Date

CANYONS SCHOOL DISTRICT is an equal opportunity employer. Applicants are considered on the basis of employment qualifications without regard to race, color, political affiliation, religion, sex, national origin, age, marital status, medical condition or handicap.

Inquiries regarding Canyons School District's hiring practices may be addressed to: Director of Human Resources, Canyons School District, 9361 South 300 East, Sandy, UT 84070.