

# SOUTH UMPQUA SCHOOL DISTRICT #19

558 SW Chadwick

Myrtle Creek, OR 97457

Ph:541-863-3115 Fax: 541-863-5212

## Application for Position of Superintendent

Last Name:  First Name:  MI:

Home Address:   
*Street, City, State, Zip*

Phone:  E-mail:

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### **Education** (Undergraduate and Graduate)

(Attach a supplemental page if necessary)

<i>Institution</i>	<i>Dates Attended</i>
<i>Major</i>	<i>Degree</i>

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<i>Major</i>	<i>Degree</i>

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**Employment History:** List all full-time experience, both in and outside the field of education, beginning with your current employment. (Attach a supplemental page if necessary).

Position:  Employer & Location:

Student Enrollment:  Years (From/To):

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Student Enrollment:  Years (From/To):

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Length of Present Contract:  Expiration Date:  Date Available:

What is your reason for leaving your last position or wanting to leave your current position?

List all other names or aliases you have used:

Are you currently licensed as an Administrator in Oregon? Yes  No

If not, are you eligible to obtain the Oregon Administrator license? Yes  No

Have you listed ALL current and former employers who are education providers in the Employment History section of this application?  
If no, please provide them all on a separate sheet. Yes  No

<p>This district does not assume any responsibility for your certification. To check your eligibility for Oregon certification, contact: Teacher Standards and Practices Commission (TSPC) 465 Commercial Street NE Salem, OR 97301 (503) 378-3586 <a href="http://www.tspc.state.or.us">www.tspc.state.or.us</a></p>
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**VETERAN'S PREFERENCE**

Are you a "Veteran" as defined under Oregon law (ORS 408.225(f))? Yes  No

Are you a "Disabled Veteran" as defined under Oregon law (ORS 408.225 (c))? Yes  No

In order for the veteran's preference to be applied, you must submit Adequate documentation (such as a Certificate of Release Discharge from Active Duty like a federal DD Form 214 or 215). You must also submit a separate document explaining which transferrable skills acquired in the military address the skills required for this position. Yes  No

**Required Information, Authorizations and Acknowledgments**

Candidates selected for an interview will be required to provide at least five references. References should reflect a broad representation of professionals.

Oregon law requires certain information from all school employees for an education provider at time of hiring. "School employees" includes superintendents and administrators. "Education provider" includes among others, the following institutions:

- K-12 school district;
- Education service district;
- Any state operated program serving kindergarten through grade 12 students;
- Public charter school; and
- Private school.

For the purposes of this application the following questions must be answered, information provided and authorizations granted. ***Your signature is required at the end of this application for your application to be complete.***

<b>Questions</b>	<b>Answer Yes/No</b>
1) Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct or alleged violation of professional standards of conduct or when you had reason to believe such investigation was imminent?	<input type="checkbox"/>
2) Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct?	<input type="checkbox"/>
3) Have you ever failed to complete a contract for educational services in any educational or school-related position for any alleged misconduct or alleged violation of professional standards of conduct?	<input type="checkbox"/>
4) Have you ever had a professional certificate, credential or license (of any kind) revoked or suspended or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct?	<input type="checkbox"/>
5) Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?	<input type="checkbox"/>
6) Have you ever surrendered a professional license of any kind before its expiration?	<input type="checkbox"/>
7) Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?	<input type="checkbox"/>
8) Have you ever been convicted or been granted conditional discharge by a court for any: (a) felony, (b) misdemeanor, or (c) major traffic violation, such as; driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended, revoked or used in violation of any license restriction; or failure to perform the duties of a driver or witness at an accident?	<input type="checkbox"/>
9) Have you ever entered a plea of guilty or No Contest relative to any charge for an offense listed in the question 8 above?	<input type="checkbox"/>
10) Have you ever had any civil judgment or other court order entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking or other threatening behavior toward other persons?	<input type="checkbox"/>
11) Have you EVER been the subject of a substantiated report of child abuse or sexual conduct (involving a K-12 student or minor child)?	<input type="checkbox"/>
12) Are you currently the subject of an ongoing investigation related to a report of suspected child abuse or sexual conduct (involving a K-12 student or minor child)?	<input type="checkbox"/>
<b>If you answered “yes” to any questions, please explain in detail on separate sheet indicating corresponding question number.</b>	

<b>Consents and Authorizations</b>	<b>Answer Yes/No</b>
1) I hereby authorize all my current and former employers who are education providers to disclose the (a) dates of my employment; (b) whether I was the subject of any substantiated reports of child abuse or sexual conduct related to my employment; (c) the dates of any substantiated reports; (d) the definitions of child abuse and sexual conduct used by the education provider when the determination was made that any reports were substantiated; and (e) the definitions of child abuse and sexual conduct used by my education provider employer to determine whether any reports were substantiated.	<input type="checkbox"/>
2) I hereby authorize my current or former education provider employers to release any disciplinary records of a crime listed in ORS 342.143 for which I was convicted.	<input type="checkbox"/>
3) I authorize my listed references, current and past employers and educational institutions, and anyone else who has information about my work history, education qualifications, or fitness to provide such information to the school district for which I have completed an employment application. I release the school district and all persons providing this information to the school district, from any liability whatsoever for obtaining and providing that information, regardless of the results.	<input type="checkbox"/>

<b>Acknowledgements</b>	<b>Answer Yes/No</b>
1) I acknowledge that should I be offered a contract for the position of superintendent as a result of this application, the school district may not enter an employment contract or agreement that:	<input type="checkbox"/>

<p>(a) Has the effect of suppressing information relating to an ongoing investigation related to a report of suspected child abuse or sexual conduct or relating to a substantiated report of child abuse or sexual conduct by a current or former employee;</p> <p>(b) Affects the duties of the education provider to report suspected child abuse or sexual conduct or to discipline a current or former employee for a substantiated report of child abuse or sexual conduct;</p> <p>(c) Impairs the ability of the education provider to discipline an employee for a substantiated report of child abuse or sexual conduct; or</p> <p>(d) Requires the education provider to expunge substantiated information about child abuse or sexual conduct from any documents maintained by an education provider.</p>	
<p>2) I acknowledge that finalists in this superintendent search may be subject to criminal records check by the school district and a license review through the Oregon Teacher Standards and Practices Commission or any other relevant state licensing agency related to my employment.</p>	<input type="checkbox"/>
<p>3) I acknowledge that the school district may conduct an Internet search, reference checks, background investigations and confirmation of employment as a part of this application.</p>	<input type="checkbox"/>

**Your application will not be considered unless it is complete. Please furnish all information including the following:**

- A completed application form
- A cover letter addressing the qualifications and qualities we are looking for
- A current resume
- 5 current letters of recommendation
- Transcripts
- A brief statement describing your thoughts on the role of an interim superintendent and what you hope to accomplish
- A copy of your administrator license or proof of eligibility for an Oregon administrator license

**Verification**

The information that I have provided in this application is true and accurate to the best of my knowledge. I have answered all of the questions to the best of my ability and I have not knowingly withheld information that would negatively affect my application. (Please attach a brief explanation for any circumstances arising from the Questions above which you believe might negatively affect your application including: criminal convictions, professional license discipline, and pending investigations in any state). Any misrepresentations or omissions of fact in this application, any materials submitted with this application, or during interviews may be cause for rejection of this application or subsequent dismissal from employment, if hired.

Signed (a typed name in this field on the part of the application constitutes a valid signature)

Date

Please return the completed and signed application form with other application materials by e-mail attachment as either PDF or Word documents to:

Tabitha Roberts  
 Human Resource Coordinator  
 South Umpqua School District  
 E-mail: [tabitha.roberts@susd.k12.or.us](mailto:tabitha.roberts@susd.k12.or.us)

*South Umpqua School District #19 is an Equal Opportunity Employer and does not discriminate in employment on the basis of race, religion, sex, national origin, age, marital status, or disability. South Umpqua School District complies with all applicable state and federal statutes and regulations in employment.*