Position for which you are applying:_____

I. Please forward all application materials to:

Superintendent's Office
800 N. Boulevard
Gunnison, CO 81230

II. A completed application packet should consist of the following:

- Application form
- A letter of application stating reasons for applying for the position
- A resume
- A copy of Colorado Professional License (or evidence of eligibility)
- Complete undergraduate and graduate transcripts (copies are acceptable)

III. All verbal inquires regarding this position should be directed to Human Resources, Gunnison, Colorado, (970-641-7760).

PERSONAL INFORMATION

Name_____ Phone_____

Home Address_____
(Street) (City) (State) (Zip)

Present Position_____Since_____

Address_____Phone_____

Type of Organization_____Annual Budget $_____

School Enrollment_____District Enrollment_____

Number of People Responsible to you_____

Present Salary $_____ Benefits and approximate values _____

Are you eligible for a Colorado Professional Administrator License?** Yes No Uncertain

** For further information contact: Colorado Department of Education, Denver, CO (303-866-6628)

PROFESSIONAL PREPARATION

List in reverse chronological order.

Degree	Institution and Location	Dates Attended	Date of Degree	Major/Minor

Please list your special achievements, (Publications, fellowships, honors, consulting, community recognition, professional organizations, etc):

_____

_____

_____

_____

EMPLOYMENT HISTORY

Please list your last six full-time positions in reverse chronological order.

Institution and Location	Position	From/To	Students	Reasons for Leaving

May we contract your present employer? _____Yes _____No

REFERENCES

(See first page for four required references)

Name	Position	Present Address	Daytime Phone

Have you ever been convicted of any crime (other than a minor traffic violation)? _____ Yes _____No

If yes, what was the disposition of the case?_____

_____

My credentials have been requested from _____
(name of institution)

I request that this application and my candidacy be held in strict confidence. ___Yes _____No

I certify that all statements made on this application are true, complete, and current. I authorize investigation of all statements on this application.

_____ _____
Signature Date

All qualified applicants will receive consideration for employment without regard to race, color, creed, sex, or national origin. This school district offers equal opportunity and treatment to all employees and qualified applicants.

No smoking is allowed in any school district working/meeting areas or vehicles. Selected applicant must comply with the Gunnison Watershed School District's Drug-Free Workplace Policy.

APPLICANTS OATH

APPLICANT:_____ DATE:_____
Last First MI

SOCIAL SECURITY NUMBER:_____ DOB:_____
(Optional)

1.____Have you ever been convicted of a felony, pleaded *nolo contendere* or received probation for any offense involving moral turpitude? (Moral turpitude includes, but is not limited to, such offenses as theft, attempted theft, murder, rape embezzlement and indecency with a minor.)

If yes, state the nature of the offense, date of the conviction, the name and address of the court and other pertinent details:_____

_____

_____

*** Conviction of a crime is not an automatic bar to employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.**

2.____Have you ever been involuntarily terminated or asked to resign from the employment of another school district/or employer other than a school district?

If yes, please give the name of the district, the date and reasons for the termination or request for resignation.__

_____

_____

_____

3.____Are you aware of any reason you would not be able to perform the duties required of the position for which you are making an application?

If yes, please explain:_____

_____

_____

_____ _____
Signature of Applicant Date