



Crossroads Charter Schools organization is an equal opportunity employer. Applicants are considered for all positions without regard to sex, race, religion, color, national origin, ancestry, age, disability, sexual orientation, gender identity, or any other factor prohibited by law.

Your application must be complete in order to be considered for employment. If a question does not apply please use N/A. Although a resume is welcome, it will not be accepted in lieu of completing this application. Please type or print neatly. Email your cover letter, resume and application form to apply@crossroadsschoolskc.org or mail to Crossroads Charter Schools, 1011 Central St. Kansas City, MO 64105.

POSITION DESIRED:

- | | |
|---|--|
| <input type="checkbox"/> Teacher | <input type="checkbox"/> Custodian/Maintenance |
| <input type="checkbox"/> Teacher Paraprofessional | <input type="checkbox"/> Administrative |
| <input type="checkbox"/> Special Education | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> Substitute | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Counselor | |

PERSONAL INFORMATION:

Today's Date: _____ *Application will be kept on file for one year from this date.*

Full Legal Name: _____

Other Name(s): _____

Home Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

What is the best way to reach you?

- Home Phone Cell Phone Work Phone

EMPLOYMENT INFORMATION:

1. What is your present employment status? _____

2. If you are currently employed, please provide the name of your employer and clarification on why you want to change positions: _____

3. If offered a position, how soon could you start? _____

4. If you are under contract, when does it expire? _____

EXPERIENCE:

Please describe all work experience, beginning with the most recent employer. You may list significantly different jobs within the same organization as separate items. If you need additional space use a separate sheet of paper. Explain any years omitted in experience history.

1. Job Title: _____
Employer Name: _____ May we contact this employer? Yes No
Employer Address: _____
Immediate Supervisor Name & Title: _____ Phone #: _____
Dates Employed: From _____ To _____ # of Years Full-Time: _____ # of Years Part-Time: _____
Salary: Start _____ Finish _____
Responsibilities: _____
Reason for Leaving: _____

2. Job Title: _____
Employer Name: _____ May we contact this employer? Yes No
Employer Address: _____
Immediate Supervisor Name & Title: _____ Phone #: _____
Dates Employed: From _____ To _____ # of Years Full-Time: _____ # of Years Part-Time: _____
Salary: Start _____ Finish _____
Responsibilities: _____
Reason for Leaving: _____

3. Job Title: _____
Employer Name: _____ May we contact this employer? Yes No
Employer Address: _____
Immediate Supervisor Name & Title: _____ Phone #: _____
Dates Employed: From _____ To _____ # of Years Full-Time: _____ # of Years Part-Time: _____
Salary: Start _____ Finish _____
Responsibilities: _____
Reason for Leaving: _____

4. Job Title: _____
Employer Name: _____ May we contact this employer? Yes No
Employer Address: _____
Immediate Supervisor Name & Title: _____ Phone #: _____
Dates Employed: From _____ To _____ # of Years Full-Time: _____ # of Years Part-Time: _____
Salary: Start _____ Finish _____
Responsibilities: _____
Reason for Leaving: _____

REFERENCES:

Applicants should submit three professional and three personal references.

Professional References	Personal References
Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____	Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____
Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____	Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____
Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____	Name: _____ Relationship to Applicant: _____ Phone: _____ Email Address: _____

EDUCATION:

Please circle highest level of education you have completed:

8 9 10 11 12 Some College Bachelor's Degree Master's Degree Doctorate Degree

If you did not complete high school, do you have a GED/high school equivalency diploma? Yes No

Please list, in order of attendance, all post high school educational institutions attended.

Institution Name and Location	Degree	Major/ Minor	Graduation Month/Year

APPLICANT CERTIFICATION:

1. Have you ever been involuntarily terminated from employment? Yes No
If yes, please give the name of the employer, the date, and the reasons for termination:

2. Have you ever been convicted of a felony, a crime of moral turpitude (i.e. lying, cheating, or stealing) or any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? Yes No
If yes, please explain:

3. Have you ever been charged and found guilty of child abuse and/or neglect or are there any criminal charges/proceedings pending against you? Yes No
If yes, please explain:

Conviction of a crime is not an automatic dismissal from employment. The school will consider the nature of the offense and the relationship between the offense and the position for which you are applying.

Are you legally eligible for employment in the United States? Yes No

I hereby certify that all statements are true, complete, and correct to the best of my knowledge and belief. I understand that if employed the terms of the contract are subject to change should the information provided in this application prove to be inaccurate or not officially verifiable.

I hereby authorize the Office of Personnel to conduct work history, personal references, or police record inquiries and waive the right to hold liable those persons for providing any requested information. It is understood that such information is to be absolutely privileged, confidential, and used only in determining my qualifications for employment and assignment.

I agree that any willful omission or falsification of material facts in this application, which would ordinarily be used as a basis for not hiring me, will constitute sufficient reason for immediate dismissal.

I understand that I will not be considered unless this application is completed in detail.

Applicant Signature: _____ Date: _____

ADDITIONAL INFORMATION:

Applicants for teaching and administrative positions must complete the following:

1. Do you hold a current Missouri teaching certificate for the position(s) for which you are applying? Yes No

If yes, expiration date: _____

If no, are you eligible for a Missouri license for the position(s) for which you are applying? Yes No

2. Do you have a valid teaching certificate in a state other than Missouri? Yes No

If yes, which state? _____ Title: _____ Expiration date: _____

3. Has your teaching license ever been suspended or revoked? Yes No

If yes, please explain:

4. List your Missouri certificate endorsements (include copies of your certificate with this application):

5. List the position(s) you prefer (in order of priority):

6. If hired, how would you work to provide a safe, orderly, and positive academic environment?

7. Number of years full-time in public education: _____

Applicant Signature: _____ Date: _____

OPTIONAL APPLICANT INFORMATION:

The following information will not be used for making hiring decisions and will not be kept with your application.

The information in this section is needed to analyze and ensure compliance with State and Federal Equal Employment Opportunity laws and to meet the reporting requirements for these laws. After this information is recorded, this section will be separated from your application.

Applicant's Gender:

- Male
- Female

Applicant's Race/Ethnicity:

- American Indian/Alaskan Native
- Asian/Pacific Islander
- Black/African American
- Hispanic/Latino
- White/Caucasian

Applicant's Age Group:

- Under 19 years old
- 20 – 29 years old
- 30 – 39 years old
- 40 or more years old

Position(s) applied for: _____