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| Superintendent Application(Please Print or Type) |

## Applicant Information

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| --- | --- | --- | --- | --- | --- |
| Full Name: |   |   |   |  |   |
|  | Last | First | M.I. |  | *Professional Personal ID* |

|  |  |  |
| --- | --- | --- |
| Present Address: |   |   |
|  | Street Address | Apartment/Unit # |
|  |   |   |   |
|  | City | State | ZIP Code |

|  |  |  |
| --- | --- | --- |
| Permanent Address: |   |   |
|  | Street Address | Apartment/Unit # |
|  |   |   |   |
|  | City | State | ZIP Code |

|  |  |
| --- | --- |
| Email Address: |   |

|  |  |  |  |
| --- | --- | --- | --- |
| Present Position: |   | School District/Organization: |   |

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| --- | --- |
| If currently serving as a Superintendent or Assistant Superintendent, list the end date of your current contract:  |   |

|  |
| --- |
| The following section must be completed with dollar amounts. Please do not enter “negotiable”. |

|  |  |  |  |
| --- | --- | --- | --- |
| Present Salary Range: |   | Expected Salary Range: |   |

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| If currently serving as a District or School Administrator, please provide the following information: |

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| --- | --- | --- | --- | --- | --- |
| District Annual Budget: |   | Number of Teachers: |   | Number of Non-Certified Staff: |   |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number Admin./Supervisory Staff |   | Current Pupil Enrollment: |   | Number of Schools:  |   |

## Certification

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| List all areas in which you hold a valid Pennsylvania and/or out-of-state teaching certificates. Note: Applicants holding a certificate from another state must obtain a Pennsylvania certificate in order to serve as a Superintendent in Pennsylvania Public Schools. |
| **Area of Certification** | Issuing State | **Date Issued** |
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## Educational Background

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | School Or Institution & Location | **Major/Minor** | **Diplomas, Degrees, or Credits Earned** | **Grade Point Average (GPA)** |
| **High School** |   |  |  |  |
| **College/University** |   |  |  |  |
| **College/University** |   |  |  |  |
| **Graduate Study** |   |  |  |  |
| **Graduate Study** |   |  |  |  |

## Professional Certificates

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## Classroom Teaching Experience

(Present or Most Recent First)

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

## Administrative and/or Supervisory Experience

(Present or Most Recent First)

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

|  |  |  |
| --- | --- | --- |
| **Dates:** | Name of Employer & Address | Your Title |
| From: |   |   |   |
|   |
| To:  |   |   |   |
| (Area Code) Telephone: |   |

|  |  |
| --- | --- |
| Work Performed: | Reason For Leaving: |
|   |   |
| Name & Title of Supervisor: |   | Final Yearly Salary: |   |

|  |  |  |
| --- | --- | --- |
| Have you ever been terminated from a position? | YES |[ ]  NO |[ ]

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| Have you ever had your contract non-renewed or bought out? | YES |[ ]  NO |[ ]

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| If yes, briefly explain: |

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## Achievements

Describe any outstanding achievements in your present and past positions:

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## Services and Honors

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| Community Activities:  |

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| --- |
| Professional Organization Memberships:  |

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| --- |
| Professional Honors Received:  |

|  |
| --- |
| Other Interests:  |

|  |
| --- |
| Professional Publications – Books/Articles:  |

## Areas of Highest Demonstrated Competence

Choose three of the following categories in which you excel:

|  |  |
| --- | --- |
|[ ]  Adaptability |[ ]  Management of Growth |
|[ ]  School Finance |[ ]  Personnel Management |
|[ ]  Community Relations/Involvement |[ ]  Executive Director/Board Relations |
|[ ]  Comprehensive Planning |[ ]  Staff Development |
|[ ]  Curriculum/Instruction |[ ]  Public Relations |
|[ ]  Negotiations |[ ]  Building Programs |
|[ ]  Administration Management |[ ]  Technology |
|[ ]  Staff Relations |[ ]  Special Education |

## Physical Examination

Candidates must be able to perform the essential functions of the position. The Board of Education may require, at its own expense, a complete physical examination related to the primary functions and responsibilities of the position, if a conditional offer of employment is made.

Are you aware of any reason you would not be able to perform the duties, with reasonable accommodations, required of the position in which you are applying for? YES [ ]  NO [ ]

## References

References should include board members and direct reports (present or past) who have first-hand knowledge of your professional competence and personal qualifications. At least two board members with whom you have worked must be included. References will only be contacted if you are a finalist. You will be advised at least one day in advance of the reference check process.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Position** | **Address** | **Telephone** |
|    |   |   |   |
|   |   |   |   |
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## Other Qualifications

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| Summarize special job-related skills and qualifications acquired from employment or other experiences (including U.S. military service) and/or state any additional information you feel may be helpful in considering your application, i.e. honors, awards, activities, technology skills, or professional development activities: |
|   |

## Open Ended Response

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| We are interested in your professional experiences and your ability to organize and express thoughts on a specific topic in a succinct manner. Please answer the questions below. |
| Why are you applying for this position?  |
| What are the most important qualities of an effective Superintendent?  |
| Describe your experience in improving school culture and community relations.  |
| Describe your experience in improving the quality of teaching/learning.  |
| Describe your experience with fiscal responsibilities, which could include; grant writing, budget oversite, building projects, contract negations, etc..  |
| Describe your experience with implementing technology.  |

## General Background Information

You must give complete answers to all questions. If you answer “Yes” to any question, you must list all offenses, and for each conviction provide a date of conviction and disposition, regardless of the date or location of occurrence. Conviction of a criminal offense is not a bar to employment in all cases. Each case is considered on its merits. Your answers will be verified with appropriate police records.

Criminal Offense includes felonies, misdemeanors, summary offenses and convictions resulting from a plea of “no contendere” (no contest).

Conviction is an adjudication of guilt and includes determinations before a court, a district justice, or a magistrate, which results in a fine, sentence, or probation.

You may omit: minor traffic violations, offenses committed before your 18th birthday which were adjudicated in juvenile court or under a Youth Offender Law, and any convictions which have been expunged by a court or for which you successfully completed an Accelerated Rehabilitative Disposition program.

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| --- | --- | --- |
| Were you ever convicted of a criminal offense? | YES |[ ]  NO |[ ]
| Are you currently under charges for a criminal offense? | YES |[ ]  NO |[ ]
| Have you ever forfeited bond or collateral in connection with a criminal offense? | YES |[ ]  NO |[ ]
| Within the last ten years, have you been fired from any job for any reason? | YES |[ ]  NO |[ ]
| Within the last ten years, have you quit a job after being notified that you would be fired? | YES |[ ]  NO |[ ]
| Have you ever been professionally disciplined in any state?Professional discipline means the annulment, revocations, or suspension of your teaching certificatation or having received a letter of reprimand from an agency, board, or commission of state government, such as the Pennsylvania Professional Standards and Practices Commission | YES |[ ]  NO |[ ]
| Are you subject to any visa or immigration status, which would prevent lawful employment? | YES |[ ]  NO |[ ]
| **Note: If you answered “Yes” to any of the above questions, please provide a detailed explanation on a separate sheet of paper, including dates, and attach it to this application. Please print and sign your name on the sheet.** |

## Certification and Release of Authorization

I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that any misrepresentation of information shall be sufficient cause for: (1) rejecting my candidacy, (2) withdrawing of any offer of employment, or (3) terminating my employment.

I hereby authorize any and all of my previous employers and/or supervisors to release any and all of my personnel records, and to respond fully and completely to all questions that officials of the Intermediate Unit may ask regarding my prior work history and performance. I will hold such previous employers and/or supervisors harmless of any and all claims that I might otherwise have against them with regard to statements made to this school district. I further authorize these officials to investigate my background, now or in the future, to verify the information provided and release from liability all persons and/or entities supplying information regarding my background. However, I do not authorize the production of medical records or other information, which would tend to actually identify a disability nor do I authorize inquiries which would include information related to any medical condition or medical history. Further, I do not waive any rights which I may have under state or federal law related to my right to challenge the disclosure of unlawful or inaccurate information, whether by the school district or by entities or persons providing such information to the school district, including any and all claims concerning allegations of employment discrimination because of race, color, sex, religion, national origin, ancestry, age, or disability.

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| --- | --- | --- |
|   |  |  |
| **Date** |  | Signature of Candidate (in ink) |

**Required supporting documentation to be included with your application:**

* **Cover Letter**
* **Resume**
* **Three Current Letters of Recommendation**
* **University Transcripts**
* **PA Letter of Superintendent Eligability**
* **ACT 34 Clearance (PA State Police Criminal Background Check)** – Submit a copy of a Criminal History Record from Pennsylvania State Police. Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.
* **ACT 114 (Federal Criminal History Record)** – Submit a copy of a Federal Criminal Record from the Federal Bureau of Investigation (FBI). Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.
* **ACT 151 Clearance (PA Child Abuse History Clearance) –** Submit a copy of an official clearance from the Pennsylvania Department of Public Welfare. Prospective employees must submit ORIGINAL report, which may not be more than one (1) year old.

**Submit your completed application and supporting documentation electronically or via US mail to:**

**Dr. Christina Steinbacher-Reed, Executive Director**

**BLaST IU 17**

**PO Box 3609**

**Williamsport, PA 17701**

**Email: creed@iu17.org**