Employee Application for Principal/Administrator Personnel Oregon Conference

Name					
Last		First		Middle	
Date of Application		Date Av	vailable		
Present Address		Telepho	ne ()		
E-Mail Address		Cell pho	one ()		
Permanent Address		Telepho	one ()		
U.S. Citizen	Yes N	Type o	f Visa		
Current position / so Years under current	chool employment	Are you u	nder contract Y/	N	
	onal certificate				
State teaching crede	ential(s)	,	Expiration	on date(s)	
Indicate your prefer	ence for administration	on:	,	9-12	
	ng for a position of ar se areas where you h				
	XPERIENCE: Begin	_	, ,		
College/University	Date	Dates attended		Type of Degree	
Majors	Area	a of Emphasis/Minor	Area of Emphasis/Minor		
Majors	Area	of Emphasis/Minor	Area of Empl	nasis/Minor	
REFERENCES:					
	Name/Position			Phone	
	Name/Position			Phone	
	Name/Position			Phone	

	IAL EXPERIEN erience.	NCE OR TRAINING:	Use the key below to indicated (T)raining or		
Performance Assessment			Brain Based Learning (Eric Jensen)		
Peer Coaching			ITI: The Model (Susan Kovalik)		
Quality School (William Glasser)			Love and Logic		
Integrated Curriculum			Dimensions of Learning		
Other			Other		
Have :	you ever:				
	_ No	been placed on administrative leave?			
	No No	been asked to resign from a teaching position? been refused continuing employment as a teacher/administrator			
	No No	been convicted, pled guilty, or pled no contest to a felony?			
	No	been convicted, pled guilty, or pled no contest to a crime involving child abuse or sexual abuse?			
If yes,	please explain.				

AUTOBIOGRAPHY (Please write a short autobiography. You may include another sheet if so please attach your name. Indicate events that led you to choose administration as an emphasis).

SPIRITUAL GIFTS AND EDUCATIONAL VISION (Please write a short description of your gifts and a short explanation of your educational vision(s).

(1)

(2)

Please indicate in a brief statement your strengths in administration:
In a brief statement describe your philosophy of discipline?
In a brief statement please describe what are the salient points of fiscal responsibility.
Applications will remain active for one year. Applicants should contact the Oregon Conference Office of Education should they wish the application to extend beyond that period.
I understand that any omissions on this application may prevent the application from being evaluated or referred to schools with vacancies. I authorize the Office of Education or any school within the conference to obtain information about my criminal record, and to check my references, or to obtain information form prior employers and school institutions. I verify that All information on this application is true and complete, and that any misrepresentation, falsification, or omission, will be sufficient cause to not be considered for a position.
Signature Date