



# WEST NODAWAY R-I SCHOOL

17665 US HIGHWAY 136  
PO BOX 260  
BURLINGTON JCT., MO 64428  
PHONE: (660) 725-3317 FAX: (660) 725-4300

**"Home of the Rockets"**



**Holly Brady**  
Elementary/High School Principal  
hbrady@wnrockets.com

**Shannon Nolte**  
Superintendent  
snolte@wnrockets.com

**Roger Johnson**  
High School Assistant Principal  
rjohnson@wnrockets.com

## PROFESSIONAL STAFF APPLICATION

(Please type or print)

**Note: Applications will be held for two (2) years only, unless renewed by applicant.**

### NOTICE OF NONDISCRIMINATION

Application for admission and employment, students, parents of elementary and secondary school students, employees, sources of referral of applicants for admission and employment, and all union or professional organizations holding collective bargaining or professional agreements with West Nodaway R-I Schools are hereby notified that this institution does not discriminate on the basis of race, color, national origin, sex, age, or handicap in admission or access to, or treatment or employment in, its programs and activities. Any person having inquiries concerning West Nodaway R-I Schools' compliance with the regulations implementing Title VI, Title IX, or Section 504 is directed to contact the Superintendent of Schools, P.O. Box 260, Burlington Junction, MO 64428, 660-725-4613. The Superintendent of Schools has been designated by West Nodaway R-I Schools to coordinate the institution's efforts to comply with the regulations implementing Title VI, Title IX and Section 504. Any persons may also contact the Assistant Secretary for Civil Rights, U.S. Department of Education, regarding the institution's compliance with regulations implementing Title VI, Title IX, or Section 504.

Superintendent

In accordance with Drug Free Public Law 101-226, the building and school premises will be tobacco, alcohol and drug-free. The use of illicit drugs, the unlawful possession and use of alcohol is wrong and harmful. Compliance with these standards of conduct is mandatory.

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
Last First MI DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
911 address PO Box City State Zip

TELEPHONE NO. HOME: \_\_\_\_\_ CELL PHONE NO. \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

IF INFORMATION NECESSARY TO PROCESS THIS APPLICATION IS LOCATED UNDER A DIFFERENT NAME, PLEASE INDICATE SUCH NAME(S):

\_\_\_\_\_  
\_\_\_\_\_

DO YOU HOLD A VALID MISSOURI TEACHING CERTIFICATE? \_\_\_\_ YES \_\_\_\_ NO OTHER STATE \_\_\_\_\_

LIST ALL GRADE LEVELS OR SUBJECTS YOU ARE CERTIFIED TO TEACH: \_\_\_\_\_

WHAT IS YOUR PREFERRED LEVEL FOR TEACHING? \_\_\_\_ ELEMENTARY \_\_\_\_ MIDDLE SCHOOL \_\_\_\_ SECONDARY

WHAT POSITION ARE YOU APPLYING FOR? \_\_\_\_\_

LIST ALL COLLEGES/UNIVERSITIES FROM WHICH YOU HAVE RECEIVED A DEGREE

NAME OF COLLEGE	LOCATION	DEGREE
_____	_____	_____
_____	_____	_____
_____	_____	_____

UNDERGRADUATE MAJOR: \_\_\_\_\_ UNDERGRADUATE MINOR: \_\_\_\_\_

GRADUATE MAJOR: \_\_\_\_\_ GRADUATE MINOR: \_\_\_\_\_

HAVE YOU HAD PRIOR TEACHING EXPERIENCE? \_\_\_\_\_ TOTAL NUMBER OF YEARS TAUGHT: \_\_\_\_\_

LIST YOUR TEACHING EXPERIENCE (LASTEST POSITION FIRST)

SCHOOL DISTRICT	YEARS	LOCATION	GRADE / SUBJECT TAUGHT

WHAT EXTRA-CURRICULAR ACTIVITIES CAN YOU DIRECT? \_\_\_\_\_

PLEASE LIST PROFESSIONAL AND/OR COMMUNITY ORGANIZATIONS YOU ARE INVOLVED WITH: \_\_\_\_\_

WHY ARE YOU INTERESTED IN TEACHING IN THE WEST NODAWAY R-I SCHOOL DISTRICT? \_\_\_\_\_

MAKE A BRIEF COMMENT ON YOUR PHILOSOPHY OF EDUCATION:

LIST AT LEAST 3 PROFESSIONAL REFERENCES

NAME	POSITION	LOCATION	PHONE NO.

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

WHEN COULD YOU BE AVAILABLE FOR AN INTERVIEW? \_\_\_\_\_

GENERAL REQUIREMENTS OF MISSOURI SCHOOL LAWS:

1. A VALID MISSOURI TEACHING CERTIFICATE IS REQUIRED OF EACH TEACHER HIRED.
2. AN UP-TO-DATE TRANSCRIPT OF COLLEGE CREDITS IS REQUIRED OF EACH TEACHER HIRED.

HAVE YOU EVER BEEN CONVICTED OF, PLEADED GUILTY TO, PLEADED "NO CONTEST" TO, OR BEEN FOUND GUILTY OF ANY FELONY OR CRIMINAL MISDEMEANOR? \_\_\_\_\_ YES \_\_\_\_\_ NO (IF YES, PLEASE ATTACH AN EXPLANATION OF EACH INSTANCE.)

I AUTHORIZE WEST NODAWAY R-I SCHOOLS TO MAKE ANY INVESTIGATION OF MY PERSONAL OR EMPLOYMENT HISTORY AND AUTHORIZE ANY FORMER EMPLOYER, PERSON, FIRM, CORPORATION, CREDIT AGENCY, OR GOVERNMENT AGENCY TO GIVE WEST NODAWAY R-I SCHOOLS ANY INFORMATION THEY MAY HAVE REGARDING ME. IN CONSIDERATION OF WEST NODAWAY R-I SCHOOLS' REVIEW OF THIS APPLICATION, I RELEASE THE WEST NODAWAY R-I SCHOOLS AND ALL PROVIDERS OF INFORMATION FROM ANY LIABILITY AS A RESULT OF FURNISHING AND RECEIVING THIS INFORMATION.

DATE: \_\_\_\_\_

\_\_\_\_\_  
APPLICANT'S SIGNATURE

RETURN APPLICATION TO:

OFFICE OF SCHOOL SUPERINTENDENT  
WEST NODAWAY R-I SCHOOL DISTRICT  
PO BOX 260  
BURLINGTON JCT., MO 64428  
[snolte@wnrockets.com](mailto:snolte@wnrockets.com)

It is the policy of the West Nodaway R-I School District not to discriminate on the basis of race, color, religion, sex, national origin, age, or disability in its programs or employment practices as required by Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975 and Title II of the Americans with Disabilities Act of 1990.

Persons with a grievance should contact the Superintendent at the West Nodaway R-I Administration Office, PO Box 260, Burlington Junction, MO 64428, Telephone 660-725-4613.

# QUESTIONNAIRE

*The following questions are designed to assist the screening committee in the selection process. Your concise and candid responses are important.*

**1. What are your strengths as a teacher/administrator?**

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**2. What personal qualities should a teacher/administrator possess?**

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**3. Describe the most exciting developments in education today.**

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**4. Why do you want a position with West Nodaway R-I Schools?**

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**5. Give any other information you feel would be important to the selection committee.**

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***Please address communications to:***

***Mr. Shannon Nolte, Superintendent  
West Nodaway R-I School District  
PO Box 260  
Burlington Junction, MO 64428  
[snolte@wnrockets.com](mailto:snolte@wnrockets.com)***

***IN ORDER FOR YOUR APPLICATION TO RECEIVE CONSIDERATION, COMPLETE TRANSCRIPTS, COLLEGE PLACEMENT CREDENTIALS AND REFERENCE SOURCES MUST BE ON FILE. IT IS THE CANDIDATE'S RESPONSIBILITY TO HAVE TRANSCRIPTS AND PLACEMENT PAPERS FORWARDED AND TO PROVIDE COMPLETE REFERENCE INFORMATION REQUESTED ON THIS APPLICATION.***