



CITY OF SATSUMA SCHOOL SYSTEM
220 BAKER ROAD
P. O. BOX 939
SATSUMA, ALABAMA 36572
PHONE (251) 380-8200
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BOARD MEMBERS
LINDA ROBBINS
JAMES WOOSLEY
MATT DIAL
KORY WESLEY
VALEDA LANKFORD

Employment Application for City of Satsuma School System Superintendent

This document should be submitted to Mr. R. Nash Campbell, Board Attorney only.

PERSONAL INFORMATION

Full Name: _____

Address: _____

Mailing Address (if different): _____

Cell phone number: _____ Other phone number: _____

Email: _____

EDUCATION

College: _____ Year Graduated: _____

Major: _____ Degree: _____

College: _____ Year Graduated: _____

Major: _____ Degree: _____

EMPLOYMENT HISTORY Please provide your complete employment history, with the most recent first.
Attach additional sheets as needed.

Company name _____ Telephone _____

Street address _____ City _____ State ____ Zip Code _____

Employed from month/year _____ Employed to month/year _____

Name of supervisor _____ May we contact this employer? Yes ____ No ____

Annual Salary _____ Job title _____

Reason for leaving _____

Company name _____ Telephone _____
Street address _____ City _____ State ____ Zip Code _____
Employed from month/year _____ Employed to month/year _____
Name of supervisor _____ May we contact this employer? Yes ____ No ____
Annual Salary _____ Job title _____
Reason for leaving _____

Company name _____ Telephone _____
Street address _____ City _____ State ____ Zip Code _____
Employed from month/year _____ Employed to month/year _____
Name of supervisor _____ May we contact this employer? Yes ____ No ____
Annual Salary _____ Job title _____
Reason for leaving _____

QUALIFICATION: Use an attachment if necessary. List any skills, knowledge, experience, or other relevant qualifications that demonstrate your ability to meet the qualifications and traits listed.

HONROS AND AWARDS. Use an attachment if necessary. List scholarships, articles authored, books authored, honorary degrees, citations, special recognitions, workshops conducted, major addresses, etc.

COMMUNITY ACTIVITIES. Use an attachment if necessary.

SKILLS: Please describe your computer skills. List any additional skills that pertain to this position.

MAJOR CAREER ACCOMPLISHMENTS AND PERSONAL ATTRIBUTES. List those that will help assure your success as the superintendent of this school system. Use an attachment if necessary.

EDUCATION PHILOSOPHY. Provide a short commentary describing your view of the elements of a successful school system. Use an attachment if necessary.

APPLICANT'S STATEMENT. Why do you want to come to this school system? Use an attachment if necessary.

REFERENCES

1. Name _____ Relationship _____
Employer _____ Telephone _____
Address _____ Years Known _____

2. Name _____ Relationship _____
Employer _____ Telephone _____
Address _____ Years Known _____

3. Name _____ Relationship _____
Employer _____ Telephone _____
Address _____ Years Known _____

Please READ Carefully.

1. Do you understand that because of the nature of the position for which you are applying, that the school system may require a background check, including a search of fingerprint, other criminal records and credit history?

Yes _____ No _____

Birth date (for background check purposes only): _____

2. Do you agree and consent for such background search and investigation to be conducted and agree to hold the school system and all officials, representatives and employees of the foregoing harmless from all claims for libel, slander, invasion of privacy, intentional infliction of emotional distress and similar claims?

Yes _____ No _____

3. Have you ever been convicted of any crime, entered a plea of guilty or nob contendere or any similar criminal or quasi-criminal determination or adjudications, other than minor traffic violations?

Yes _____ No _____

If the answer is "yes" state the name and address of the court, the date of the alleged offense and allegation, a description of the charges and an explanation of the final action taken, including any fines, probation, imprisonment, first-offender adjudication or similar disposition.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application may result in my release.

Signature: _____ Date: _____

The application process will be confidential. Only the names of finalist will be announced to the public.

Please submit Application, Letter of Interest, Resume, and Copy of Certification Credentials to:

Mr. R. Nash Campbell, Board Attorney
Adams and Reese LLP
P. O. Box 1348
Mobile, AL 36633
(251) 433-3234
(251) 438-7733 (fax)
Nash.campbell@arlaw.com

ALL INQUIRIES AND APPLICATIONS SHOULD BE DIRECTED TO MR. R. NASH CAMPBELL ONLY. PLEASE DO NOT CONTACT OUR CENTRAL OFFICE OR APPLY ONLINE THROUGH THE STATE DEPARTMENT OR ANY ONLINE SERVICE.

The Satsuma City Schools does not discriminate on the basis of race, age, color, national origin, religion, sex, genetic information, or physical or mental disability in admission to, access to, treatment in or employment in its programs and activities.