

Application for Superintendent

Application Information

Full Name:					Date:		
	Last	First		<i>M.I.</i>			
Address:							
	Street Address				Apartment/	Unit #	
	City		S	ltate	Zip		
Phone:		Em	ail:				
Present Position/School Corporation:							
	Years in This Position				Years in Corporation		
	Pupils Enrolled				Elementary Schools		
	Total Certified Staff				Intermediate Schools		
	Total Classified Staff				Middle/Jr. High Schools		
	Annual District Budget				Senior High Schools		
Do you hold a valid Indiana Superintendent's License?			Ŋ	Yes	No		
May we contact your current employer?			Ŋ	Yes	No		

Present Contract Relationship

Length of Present Contract		Expiration Date	Date Available	
Buy-out ClauseC	Current Salary		Board Paid Annuities	
Life Insurance Face Value _			Travel Allowance.	
Long-Term Disability Y	/es No		Dental Insurance Yes	No
Vision Insurance Y	/es No		Health Insurance Yes	No

n			
Pi Pi	rofessional Experience and Em		
	(Please list the most recen	nt first)	
Position	Organization	Dates of Employmen	t
C	unduate and Undergradua	to Information	
U	raduate and Undergradua	v v	
	(Please list the most recei		
Institution	Dates Attended	Major/Minor	Degree/Da
	Professional Leade	ership	
Please list th	ree (3) professional organizations in v	which you have been most active	
	(List offices held, awards	s, etc.)	
Professional Organization	Offices Held	Responsibilities	

2

Application Questions

Samples

On a separate sheet, respond to each of the following questions/remarks in 300 words or less. Attach your responses to the application.

- **1.** Why do you want to be superintendent of **Argos Community Schools**? What special strengths do you bring to our district? What unique skills and experiences define you as a superintendent?
- 2. Describe your experience in budget and finance. How will you work to oversee the budget and provide sound finances for the future?
- **3.** Argos Community Schools are very proud of the level of community involvement. It is vital that the superintendent be involved in community activities, district-wide. Describe how you will be involved and be a leader in both district and county activities and organizations.
- 4. What is your vision and strategy for the district? Include how you will focus on improved academic performance for our students.
- 5. How will you maintain the integrity of **Argos Community Schools** while retaining current students and attract new students and families to the district?

6. As a superintendent, how would you market our school district? Please provide specific examples.

Additional Application Information

If you answer YES to any of the first five questions, please explain on a separate page. Include the date of the incident, the charge, the court action taken, the offense in question, and the address of the court involved.

- Are you presently being investigated or under a procedure or process to consider your discharge for misconduct by your present employer? Yes <u>No</u>
- Have you ever been reprimanded, disciplined, discharged, or asked to resign from a position? Yes____ No____
- 3. Have you ever resigned from a prior position without being asked but under circumstances involving your employer's investigation of your sexual conduct with another person, mishandling of funds, or other criminal conduct?

Yes	No

- Have you ever pleaded guilty or no contest to or have been convicted of any crime involving sexual abuse of any person or any crime of moral turpitude? Yes No
- 5. Have you ever been convicted of a misdemeanor and/or felony or ever entered a plea of guilty or a plea of no contest, or has any court deferred further proceedings with entering a finding of guilty or placed you on probation for a crime?

Yes____ No____

6. Are you eligible to work in the United States of America? Yes_____ No____

Notice, Authorization, and Release

If you are tentatively offered the Superintendent position, **Argos Community Schools** will complete an extensive background investigation prior to making the final offer of employment. If you are tentatively offered the position, you will be required to complete the authorization for an Indiana and National Background Check and submit the signed document by a date directed by Board of School Trustees of **Argos Community Schools**.

Argos Community Schools

Argos Community Schools does not discriminate on the basis of the protected classes of race, color, national origin, sex (including sexual orientation, transgender status, and gender identity), disability, age, religion, military status, ancestry, or genetic information which are classes protected by Federal and/or State law (collectively "Protected Classes") occurring in the Corporation's employment opportunities, programs, and/or activities or, if initially occurring off Corporation grounds or outside the Corporation's employment opportunities, programs, and activities, affecting the Corporation's environment.

I understand that my application will be on file with **Argos Community Schools** for at least three (3) years and that materials accompanying this application become the property of **Argos Community Schools**. I certify that I have made no misrepresentations or falsifications of these statements, answers, or included documents. I am also aware that should investigations disclose such, my application will be disqualified, my name removed from all eligible lists, and my future applications will not be accepted. I am also aware that falsification of this application or any accompanying data, may result in dismissal from any position at **Argos Community Schools**. I authorize any person, agency, partnership, or corporation having any information concerning my background, educational records, or employment records to release such information. This information is to be used for possible employment with **Argos Community Schools**. Furthermore, I agree that I have freely signed this document and have a copy of this Authorization and Release, whether it be a photocopy or otherwise and it shall have equal standing and import as if were the original.

Professional Qualifications and Selection Criteria

Samples

- Central office leadership preferred and building-level leadership required.
- A minimum of three years of successful public school teaching preferred.
- Effective skills in communication, multitasking, collaboration, and marketing.
- Strong working knowledge of community relations and willingness to be a visible community leader.
- Approachable leader with demonstrated ability to motivate all members of the faculty and staff and embrace a culture of excellence and continued improvement.
- Values relationships as a foundation of the district, both internal and external.
- Possess the highest personal standards, good morals, ethics, honesty, commitment, and integrity.

Submittal Information and Requirements

All applicants are expected to provide the following:

Letter of Intent Resume Completed and signed application Response to all application questions Copy of valid Indiana Superintendent license or evidence of qualification College/University credentials and transcripts Three (3) current letters of reference (Two years or less)

Directions for submitting applications and credentials:

Inquiries related to this application should be directed to the University Search Team members. Contact: Dr. Terry McDaniel at <u>tmcdaniel@indstate.edu</u> or 812-821-7252

Please complete all application documents including the required signatures. Only complete applications (including all required applications documents) will be considered.

All materials should be emailed to: Dr. Terry McDaniel at tmcdaniel@indstate.edu.

Applications must be received prior to the application deadline of September 27, 2024.