# Application Form for the Position of Superintendent



**Los Nietos School District**

*Application requirements include a completed application form, a formal letter of application, a complete current resume, and five letters of reference (at least three current, within the past year).*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name |  |  |  |  | Home Phone |  |
| Address |  |  |  |  | Office Phone |  |
| City | State | Zip |  |  | Mobile Phone |  |
| E-mail Address |  |  |  |  |  |  |

Current School District

Current District Configuration (e.g. K-6, K-12) Ethnic Composition Annual Budget

## Record of Professional Experience (begin with most recent)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Dates Served |  | District |  |
| Position | From/To (Month/Year) | District | Enrollment | Salary |

***Record of Professional Education***

Institution Dates Major Degree

## References TCG May Contact Confidentially

Names, titles and telephone numbers of at least five references, three current within the last twelve months.

Name and Title Home/Mobile Phone Number Work Phone Number

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What significant contributions do you feel you have made in an administrative position?

What important qualifications do you feel equip you to perform as the superintendent?

Do you have a California General Administrative or Standard Administrative Credential?

* Yes ❑ No

Do you object to the adviser contacting references other than those listed herein in your confidential papers?

* Yes ❑ No

Have you ever been convicted of a misdemeanor or a felony?

* Yes (If yes, please explain) ❑ No

How did you learn about this opening?

* I certify that the information provided herein is true and complete to the best of my knowledge,
* I authorize the verification of any and all information provided.
* I understand that false or erroneous information may be grounds for immediate elimination as a candidate or termination of employment if I am hired.
* I understand that if I contact a member of the Los Nietos School District Board of Trustees during the application and selection process, I will be disqualified.

Signature of Applicant Date

**Return completed application to:**

[hdanielianedd@gmail.com](mailto:hdanielianedd@gmail.com) **no later than** 4**:00 p.m. on September 23, 2021**

**For more information contact:**

Dr. Hasmik Danielian (818) 641-8989 or Dr. Fred Navarro (563) 896-0221

Information is also available at **TheCoscaGroup.com**