Greenwood School District 50

Greenwood, South Carolina

Application for Position of Superintendent

DEADLINE:

April 14, 2025

PERSONAL INFORMATION (use tab key to move to the next field) Last Name First Name Middle Name Mailing address Zip City State Home Telephone **Business Telephone** Cell Telephone E-mail Address **CURRENT EMPLOYMENT** Current position Base salary Employer: Type of school district, firm, or organization Total value of fringe benefits Operating budget of current district in which you are employed Are you certified as a superintendent in South Carolina? Yes 🗌 No 🗍 (If you do not hold a South Carolina superintendent's certificate, please contact: The Office of Educator Licensure, South Carolina Department of Education, 803-896-0325, licensure@ed.sc.gov If "yes" please attach copy of certification. Have you ever had a license or certificate revoked in any state? Yes \(\square\) No \(\square\) (if yes, provide explanation on attached sheet.) Have you ever been convicted of a crime? (Disregard minor traffic violations) Yes ☐ No ☐ (if yes, provide explanation on attached sheet.) I certify that the information in this application is true and accurate to the best of my knowledge and belief. I hereby authorize the Board of Trustees or its agents to conduct such investigation (including visits to my community) and to obtain such records (including criminal and credit records) as the Board deems necessary. I understand that giving false or misleading information, either oral or written, may result in denial or termination of my employment. Signature of Applicant Date

Applicant's Statement Please answer the following questions <u>using one-half page or less</u> for each question and attach to the application. (text blocks for these questions will expand as you type)
1. Identify characteristics of your leadership style that others would most commonly use to describe you.
2. How will you directly impact the improvement of student achievement in Greenwood School District 50?