

You have opened the application form for the

Administrator

Of

Educational Service Unit 8

Neligh, NE

In order to be considered for this position, you must submit the following:

- ➤ This signed application form (signed with questions answered)
- ➤ A letter of application
- > A resume
- Credentials (transcripts, certification of teaching/supt. degree, letters of recommendation, etc.)

by

Friday, October 26, 2018

If our office has not received these materials by the date of closing, you will not be considered for this position.

Application materials may be sent to:

Educational Service Unit 8
Attn: Elleah Wiebelhaus
Business Manager
110 E 4th Street
PO Box 89
Neligh, NE 68756

or

Emailed to: ewiebelhaus@esu8.org

Neligh, NebraskaPosition: Administrator

Application Information Form

Title: (Place and X in the box)	Dr.	Mr.	Ms.	Mrs.	Other	If other ple	ase list			
Name:						Telephone				
Home Address:						Office:				
						Home:				
_						Cell:				
Zip Code:						Email:				
Record of Profess	ional 1	Educa	tion (i	in reve	rse chr	onology)				
Institution		Grac	luatio	n Date		Major	•		Degre	e
					_					
Record of Profess	ional 1	Experi	ience	(in rev	erse ch	ronology)				
Title	Г	ates			Distr	rict	State	Enrollme	ent	Annual Salary
		to								
		to								
		to —								
		to								
Give names, titles									l board 1	nembers
Name		Tit		-		ss Phone		e Phone	C	ell Phone

Please answer the following question in 500-1000 words:				
What is the role of an ESU administrator?				
Educational Service Unit 8	Closing date October 26, 2018			

(Answer continued)		

Do you have a superintendent endorsement for the state represented by the position listed on this Application Information Form? (Place an X in the box)

Yes	NO

(If you have questions regarding the requirements to be a superintendent in the State of Nebraska, contact the Nebraska Department of Education)

I certify that the information provided herein is true and complete to the best of my knowledge.

Applicant hereby waives his/her right to confidentiality with regard to his/her work record or criminal record and consents to and authorizes the release of information from current or former employers and/or law enforcement personnel upon inquiry under this application.

Signature of Applicant:	Date:	
Printed Name of Applicant:		

This application must be COMPLETED and RETURNED by: FRIDAY, OCTOBER 26, 2012

Educational Service Unit 8
Attn: Elleah Wiebelhaus
Business Manager
110 E 4th Street
PO Box 89
Neligh, NE 68756

Phone: (402) 887-5041 Ext. 1222 E-mail: <u>ewiebelhaus@esu8.org</u> Fax: (402) 887-4604