

**MISSOURI STATE BOARD OF EDUCATION AGENDA ITEM:****June 2014**

CONSIDERATION OF A REQUEST BY THOMAS S. KOVACS  
FOR ISSUANCE OF A TEACHING CERTIFICATE

**STATUTORY AUTHORITY:**

Section 168.071, RSMo

Consent  
ItemAction  
ItemReport  
Item**DEPARTMENT GOAL NO. 3:**

Missouri will prepare, develop, and support effective educators.

**SUMMARY:**

Applicant's Name: Thomas S. Kovacs

On January 29, 2014, Thomas Kovacs applied for a Missouri Temporary Authorization Certificate of license to teach for the area of Welder, grades secondary-post-secondary.

Disposition: On July 2, 1982, Thomas Kovacs, age 23, pled guilty and received a suspended imposition of sentence to the felony, DWI; and to the misdemeanor, Failure to Drive Within a Single Lane, in the Circuit Court of Callaway County, case number 27May82-204165. On January 20, 1983, Mr. Kovacs' probation was revoked and he was given a suspended execution of sentence to the felony, DWI; and to the misdemeanor, Failure to Drive Within a Single Lane. He was placed on two years' supervised probation which was successfully completed.

Letters of Recommendation: Three (3) – (Vice President, Appraiser, Adult Programs Supervisor).

**PRESENTER(S):**

Paul Katnik, Assistant Commissioner, Office of Educator Quality, will assist with the presentation and discussion of this agenda item.

**RECOMMENDATION:**

We recommend the State Board of Education approve the application of Thomas Kovacs for a Missouri Temporary Authorization Certificate of license to teach.



DESE - Temporary Authorization Certificate Application



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION  
 OFFICE OF EDUCATOR QUALITY  
 EDUCATOR CERTIFICATION  
 POST OFFICE BOX 480  
 JEFFERSON CITY, MISSOURI 65102-0480  
 (573)751-0051

**APPLICATION FOR TEMPORARY AUTHORIZATION CERTIFICATE (JOINT APPLICATION)**  
**APPLICATION FOR RENEWAL OF TEMPORARY AUTHORIZATION CERTIFICATE (JOINT APPLICATION)**

SECTION I: APPLICANT INFORMATION

**PROFILE**

Educator ID: 593558 Social Security Number: XXXXXXXXXX  
 Name: THOMAS STEPGHEN KOVACS [View Application Checklist](#)  
 Address: 11360 SOUTH ROUTE N  
 City: COLUMBIA State:  Zip: 65203-8806  
 Personal Phone: ( 573 ) 999 - 2235  
 Work Phone: ( 573 ) 214 - 3800  
 Email Address: [TKOVACS@COLUMBIA.K12.MO.US](mailto:TKOVACS@COLUMBIA.K12.MO.US)

[Edit Contact Information](#)

**EDUCATION**

No records to display

**PROFESSIONAL CONDUCT (ALL QUESTIONS MUST BE ANSWERED)**

Please answer the following questions. If you answer yes to any of the questions, please provide an explanation in the box below.

Have you ever been charged with, convicted or entered a plea, including a plea of nolo contendere, to any felony or misdemeanor whether or not sentence was imposed or suspended, except minor traffic violations? If yes, explain fully.

Yes  No

Have you ever been denied a professional license, certificate, permit, credential, endorsement, or registration? If yes, explain fully.

Yes  No

Has your professional license (except for driver's license), certificate, permit, credential, endorsement, or registration ever been disciplined, suspended, revoked, reprimanded, restricted, curtailed or voluntarily surrendered or do you have any pending complaints before any regulatory board or agency or is there any investigation or adverse action now pending against you? If yes, explain fully.

Yes  No

Have you ever resigned, been restricted, disciplined, or discharged from any position, including the armed forces, while under suspicion of having engaged in criminal, immoral, unethical behavior or unprofessional conduct, or are you under investigation for any such charge? If yes, explain fully.

Yes  No

**PURPOSE OF APPLICATION**

- I currently do not hold a Missouri professional certificate and wish to apply for a Temporary Authorization Certificate.
- I currently hold a Missouri professional teaching certificate and wish to apply for a Temporary Authorization Certificate in a new area.
- I am applying for a Career (Vocational) Temporary Authorization Certificate.
- I am applying for a Temporary Authorization Certificate for an administrative or student services area.

Subject Area/Grade Level: WELDER S-P  
 Selected Payment Type : Debit, Credit, eCheck payment  
 Actual Payment Type : Debit, Credit, eCheck payment  
 Application Fee : 50.00  
 Amount Paid : 50.00  
 Amount Remaining : 0.00

Payment Status : Paid  
 Comments :

**PLAN OF STUDY**

INSTRUCTIONS: Complete all requested information. List the course(s) you have taken or will take to meet each requirement. In addition, please send your official transcript(s) to Educator Certification, P.O. Box 480, Jefferson City, MO 65102.

6 record(s)

COURSE TITLE	COURSE#	TITLE	INSTITUTION	CREDIT HOURS
COORDINATION OF COOPERATIVE EDUCATION (NOT REQUIRED FOR POSTSECONDARY AREAS)	BTE4241	COORDINATION OF COOPERATIVE EDUCATION	UNIVERSITY OF CENTRAL MISSOURI	3
FOUNDATION/IMPLEMENTATION	CTE4140	NEW TEACHER INSTITUTE	UNIVERSITY OF CENTRAL MISSOURI	3
CURRICULUM	CTE4145	CURRICULUM CONSTRUCTION IN CTE	UNIVERSITY OF CENTRAL MISSOURI	3
METHODS	CTE4160	METHODS OF TEACHING CTE	UNIVERSITY OF CENTRAL MISSOURI	3
ASSESSMENT	CTE4165	PERFORMANCE ASSESSMENT IN CTE	UNIVERSITY OF CENTRAL MISSOURI	3
PSYCHOLOGY OF THE EXCEPTIONAL CHILD	PSY4200	PSYCH OF EXCEPTIONAL CHILD	UNIVERSITY OF CENTRAL MISSOURI	3

**SWORN STATEMENT**

I, the above named applicant, hereby affirm under penalties of perjury that I am the applicant referred to in the preceding application for a certificate of license to teach in the state of Missouri, and that all statements and enclosures are true and accurate to the best of my knowledge, information, and belief. I understand that any misrepresentation of facts may result in the denial or revocation of the requested certificate(s). I submit for consideration this application as required by the Missouri law governing the practice of teaching. I understand that the Missouri Department of Elementary and Secondary Education may require further information of evidence that it deems reasonable and proper. Furthermore, I voluntarily consent to a thorough investigation of my present and past employment and other activities for the purpose of verifying my qualifications. In addition, I grant permission to access any court, FBI, or police records related to arrests and convictions related to good moral character or personal fitness pertinent to my certification, and to probation or parole records as well.

**RELEASE OF EDUCATIONAL INFORMATION**

I hereby give my recommending certification institution permission to release any and all information needed.

BY SELECTING "I Accept", I AGREE TO THE TERMS OF THE SWORN STATEMENT AND TO THE RELEASE OF MY EDUCATIONAL INFORMATION.

I Accept

It is the policy of the Missouri Department of Elementary and Secondary Education not to discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs or employment practices as required by Title VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Americans with Disabilities Act of 1990. Inquiries related to Department programs and to the location of services, activities, and facilities that are accessible by persons with disabilities may be directed to the Jefferson State Office Building, Office of the General Counsel, Coordinator-Civil Rights Compliance (Title VI/Title IX/504/ADA/Age Act), 6th Floor, 205 Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480; telephone number (573) 526-4757 or TTY (800) 735-2966, fax (573) 522-4883, email civilrights@dese.mo.gov.

Employing District: COLUMBIA 93

**SECTION II: TO BE COMPLETED BY EMPLOYING MISSOURI SCHOOL DISTRICT**

**LEVEL OF CERTIFICATION REQUESTED**

I hereby affirm that the applicant will be employed by this school district and used in the position requiring the Temporary Authorization Certificate listed above for the 2013-2014 school year.

The applicant's beginning contracted date is/was 01/21/2014

**TO BE COMPLETED IF APPLICANT IS RENEWING THE TEMPORARY AUTHORIZATION CERTIFICATE. REQUIREMENTS LISTED BELOW MUST BE COMPLETED DURING THE VALID DATES OF THE TEMPORARY AUTHORIZATION CERTIFICATE.**

Applicant has taken all required Praxis II tests during the first year of employment.

Applicant has completed a minimum of nine (9) semester hours toward his/her professional certification. An original transcript has been submitted. (A minimum of 9 semester hours each year is required.)

Applicant has developed a plan of study to meet required coursework.

Applicant has participated in a mentoring program.

Applicant has received successful performance based teacher evaluations.

Applicant has participated in a Beginning Teacher Assistance Program.

School District: COLUMBIA 93

Designated District Official: DR. DANA CLIPPARD

Email: [DCLIPPARD@COLUMBIA.K12.MO.US](mailto:DCLIPPARD@COLUMBIA.K12.MO.US)

Phone: ( 573 ) 214 - 3420

Memo:

Submitted By: JLEONARD

Date Submitted: 01/29/2014

BY SELECTING "I Accept", I AS THE AUTHORIZED ADMINISTRATOR CERTIFY THAT THE INSTITUTION IS IN COMPLIANCE WITH THE MISSOURI CODE OF STATE REGULATIONS AND STATUTORY REQUIREMENTS AND THAT THE INFORMATION SUBMITTED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

I Accept

**SECTION III: DESE**

Memo (Public):

Last Team Member to Update Memo:

Effective Date:	Expiration Date:
Status:	PENDING DESE VERIFICATION
Assign To:	CI
Classification:	
Analysis Indicator:	

Date Received: 01/29/2014

Email: [certification@dese.mo.gov](mailto:certification@dese.mo.gov)

Current User: ALEE Last Modified User: DBUTCHER Last Modified Date: 1/30/2014 1:37:55 PM  
"Missouri public schools: the best choice...the best results!"

[Online](#)

[Privacy/Security Policy](#)

Ver. 2.4.0294

*Attachment 5/4*

**Jeremiah W. "Jay" Nixon, Governor**



**George A. Lombardi, Director**

**Chairman and Compact Administrator**

Ellis McSwain Jr.

**Chief State Supervisor**

J. Scott Johnston

**Board Members**

Reid K. Forrester  
Brian C. Jamison  
Chuck R. Pryor  
Jim Wells

**Assistant Division Director**

Tom Hodges

3400 Knipp Drive • Jefferson City, MO • 65109  
Phone 573-751-8488 • Fax 573-751-8501

April 21, 2014

Dear: Mr. Kovacs

I am writing in reply to your request for verification of discharge from probation. Be advised this information is **confidential pursuant to section 610.120 of the Missouri Revised Statutes.**

Regarding: <b>Thomas Kovacs</b>		DOB: <b>12/28/58</b>
MDOC #: <b>109987</b>	County of Conviction: <b>Callaway</b>	Sentence Date: <b>01/20/83</b>
Offense: <b>Driving While Intoxicated</b>	Sentence: <b>Suspended Imposition of Sentence - 2 years probation</b>	
Final Discharge Date: <b>03/13/85</b>	<b>CONFIDENTIAL RECORD</b>	

Sincerely,

*Nicole Nokes*

Nicole Nokes  
Prior Conviction Material  
Missouri Department of Corrections

REC'D APR 24 2014

Attachment 1

PLAINTIFF	FILE NO.	DEFENDANT
D.W.I. 10/27/82	CR682-674M	THOMAS S KOVACS
<p><i>pg 1 yr in jail to run concurrently w/ sent in Boone Co. Exec of sent sent 329 84 Prob &amp; Cost 32 70</i></p> <p><i>1-20-83</i></p> <p><i>Prob reversed - sent ordered executed 329 84</i></p> <p><i>dept put on 2 yr S parole 8-2-84</i></p>		
Form CC-2A-W STANDARD—HANNIBAL, MO. L2610		

STATE OF MISSOURI  
 COUNTY OF CALLAWAY

I, Judy O. Groner, Clerk of the Circuit Court of Callaway County, Missouri, hereby certify that the above and foregoing is a full, true and correct copy of \_\_\_\_\_

\_\_\_\_\_ *file card*  
 \_\_\_\_\_ *Sentence & Judgement* As

fully as the same remains of record in my said office.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of my said office this 11<sup>th</sup> day of April 20 14

CIRCUIT COURT OF CALLAWAY COUNTY, MO

Clerk \_\_\_\_\_ Deputy \_\_\_\_\_

By *Jwest*

REC'D APR 24 2014

**ORDER OF PROBATION**

MAGISTRATE/CIRCUIT COURT OF BOONE COUNTY, MISSOURI

Defendant: THOMAS STEPHEN KOVACS Docket No. 27MAY82 204165

Street: 700 #1, Demaret Drive City: Columbia, Mo. County: Boone  
474-9321

OFFENSE: DMBAC AND FAILURE TO DRIVE WITHIN A SINGLE LANE Term of Probation: ONE YEAR

Total Court Costs: \$26.00 Fines: \$150.00/CC II Restitution: 0 Sentence: 30 days Boone County Jail

**\$26.00 VICTIM COMPENSATION FUND** Execution Suspended

Your application for probation has been received and approved by this Court. In accordance with the authority vested in this Court by the laws of the State of Missouri, you are hereby placed on probation for such a period of time as required by statute or until you have proven by your conduct, to the satisfaction of this Court, that you are entitled to discharge from this probation. You are hereby advised that under the law this Court may at any time revoke or modify any conditions of the probation, and you shall be subject to arrest upon order of the Court. At any time within the period of your probation the Court may impose or order execution of sentence for your original offense in accordance with the laws of the State of Missouri, and commit you to such institution as provided by law.

It is the further order of the Court that your case be assigned in the supervision of the State Board of Probation and Parole and its representative Probation and Parole Officer under the following conditions. They are authorized to report to this Court on all matters pertaining to your probation, and to make such recommendations and take such action as the Court may require in your case.

**CONDITIONS OF PROBATION**

- LAWS:** I will obey all the federal and state laws, municipal and county ordinances. I will report all arrests to my Probation and Parole Officer within 48 hours.
- TRAVEL:** I will obtain advance permission from my Probation and Parole Officer before leaving the state or the area in which I am living.
- RESIDENCY:** I will notify my Probation and Parole Officer of any changes of residency within 48 hours.
- EMPLOYMENT:** I will maintain employment unless engaged in a specific program approved by my Probation and Parole Officer. I will obtain advance permission from my Probation and Parole Officer before quitting my job or program. In the event I lose my job or am terminated from a program, I will notify my Probation and Parole Officer within 48 hours.
- ASSOCIATION:** I will not associate with any person who has been convicted of a felony or misdemeanor.
- DRUGS:** I will not have in my possession or use any controlled substance except as prescribed for me by a licensed medical practitioner.
- WEAPONS:** I will, if my probation or parole is based on a misdemeanor involving firearms or explosives, or any felony charge, not own, possess, purchase, receive, sell or transport any firearms, ammunition or explosive device or any dangerous weapon as defined by federal, state or municipal laws or ordinances.
- REPORTING/DIRECTIVES:** I will report as directed to my Probation and Parole Officer. I agree to abide by any directives given me by my Probation and Parole Officer.
- SPECIAL CONDITIONS**

Court's entry of 7-2-82: Plea of guilty to DMBAC; def. sentenced to 30 days in Boone County Jail; execution suspended on cond. of no further violations for one year; placed on supervised probation for one year with special conditions def. to complete ARTOP; on Ct. II fine of \$150.00; \$26.00 Victim Compensation and costs. JP Div. 5

I have read or have had read to me the Order of Probation and the Conditions set out therein. I agree to comply with such conditions during the period of my probation.

Witnessed by: Wanda Hardin Signed: Scott D. Kowal  
 7-2-82? 7-2-82  
 DATE DATE

Assigned 2nd day of July, 19 82, in the Magistrate/Circuit Court of BOONE County, State of Missouri. Honorable: JOAN PINNELL DIV. 5

Attest: MAXINE OMENS, BY Wanda Hardin Court Clerk Judge of the BOONE COUNTY CIRCUIT COURT

D/O/B 12-28-58 666 [REDACTED] Direct Assignment  
 Case No. 651 Date \_\_\_\_\_

HR77-151 (Rev. 8-77)

REC'D APR 24 2014

8  
Attachment 2  
Pg 2 of 2

CERTIFICATE OF TRUE COPY

I Christy Blakemore, Clerk of Circuit Court, within and for the county of Boone, State of Missouri, do certify that the foregoing is a true copy of an original document remaining on file and recorded in my office.

Witness my hand and SEAL of said Court this 17 day  
of April 2014

Christy Blakemore, Circuit Clerk BY: Christy Blakemore  
DEPUTY CLERK

REC'D APR 24 2014

IN THE CIRCUIT COURT OF BOONE COUNTY, MISSOURI

STATE OF MISSOURI . . . . . PLAINTIFF

VS. 27MAY82 204166

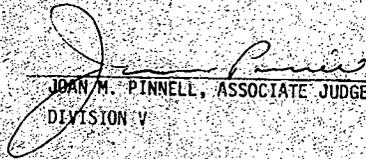
THOMAS STEPHEN KOVACS . . . . . DEFENDANT

J. U. D. G. M. E. N. T

Now on this 2nd day of July, 1982, defendant appears in person and by attorney, Charles Franklin. The State of Missouri appears by Jerome Antel, Assistant Prosecuting Attorney. State of Missouri files First Amended Information charging Ct. I as Driving With Blood Alcohol Content over 10% and on Ct. II as Failure to Drive Within a Single Lane. Formal arraignment waived and defendant enters plea of guilty to Ct. I and Ct. II. Court finds defendant guilty of Ct. I DWBAC over 10% and Ct. II Failure to Drive Within a Single Lane.

It is THEREFORE, SENTENCED, ORDERED AND ADJUDGED by the Court that the defendant, Thomas Stephen Kovacs, be sentenced to ninety (90) days Boone County Jail on Ct. I; execution suspended and defendant placed on supervised probation for one year on condition of no further violations for one year with special condition that defendant successfully complete ARTOP. On Ct. II, defendant was sentenced to fine of \$150.00. Victim Compensation Judgment of \$26.00 assessed to defendant.

Costs are taxed against defendant. Fine, costs and \$26 VCF stayed 15 days

  
JOAN M. PINNELL, ASSOCIATE JUDGE  
DIVISION V

CERTIFICATE OF TRUE COPY

I, Christy Blakemore, Clerk of Circuit Court, within and for the county of Boone, State of Missouri, do certify that the foregoing is a true copy of an original document remaining on file and recorded in my office.

Witness my hand and SEAL of said Court this 17 day of April 20 14

Christy Blakemore, Circuit Clerk BY: 

DEPUTY CLERK

REC'D APR 24 2014

*Attachment 5*

Jeremiah W. "Jay" Nixon, Governor



George A. Lombardi, Director

Chairman and Compact Administrator  
Ellis McSwain Jr.

Chief State Supervisor  
J. Scott Johnston

Board Members  
Reid K. Forrester  
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Jim Wells

Assistant Division Director  
Tom Hodges

3400 Knipp Drive • Jefferson City, MO • 65109  
Phone 573-751-8488 • Fax 573-751-8501

April 21, 2014

Dear: Mr. Kovacs

I am writing in reply to your request for verification of discharge from probation. Be advised this information is **confidential pursuant to section 610.120 of the Missouri Revised Statutes.**

Regarding: <b>Thomas Kovacs</b>		DOB: <b>12/28/58</b>
MDOC #: <b>109987</b>	County of Conviction: <b>Boone</b>	Sentence Date: <b>07/02/82</b>
Offense: <b>Driving With Blood Alcohol Content/RGLN</b>		Sentence: <b>Suspended Imposition of Sentence - 1 years probation</b>
Final Discharge Date: <b>03/13/85</b>	<b>CONFIDENTIAL RECORD</b>	

Sincerely,

*Nicole Nokes*

Nicole Nokes  
Prior Conviction Material  
Missouri Department of Corrections

REC'D APR 24 2014

March 22, 2014

State of Missouri  
Department of Elementary and Secondary Education  
Office of Educator Quality  
Conduct Investigations  
P O Box 480  
Jefferson City, MO 65102-0480

To all that come forth; Greetings,

Please allow me to introduce myself, and beg your consideration to grant a CTAC to teach at the Columbia Area Career Center.

I am Thomas Stephen Kovacs; my SSN is [REDACTED]. I was hired to fill a vacancy and complete the current school year by the Columbia Area Career Center as an instructor for Certified Welding. My starting date was 01/21/2014

Rebecca Pisano is my supervisor. Soon after my starting date, Mrs. Pisano called me into her office to complete the online application for the CTAC. I admit that when completing this application I was between classes and rushed to finish. I answered the question regarding my past criminal behavior as such for two reasons.

First, I hold no secrets about my past, and to the fact that I have pleaded guilty to a DWI charge. The DWI in question was disposed of 31 years ago, and I am now fully aware that I should have read the question on the application more carefully. I would have gladly disclosed this information. I am now aware that I in fact pleaded guilty to a Class D Felony; I did not hire an attorney to represent me in this case. I suspect that there might have been a lesser charge in the end. Sadly, I admit that for the past 31 years I truly thought that I had pleaded guilty to a Misdemeanor. I have been sober for thirty years, and through the grace of God and fellowship of Alcoholics Anonymous, I have shared my experience, strength, and hope with others to help them on their journey to a better life. I have never refused a person in need.

Secondly, my answer to this question was not in the spirit to deceive, but based on my history in the Construction Industry. I have worked on dozens of public projects, mostly public school jobs, which required me to pass background and fingerprint checks. I even worked on the MSHP Annex (after I cleared the system) where all this information is stored. I have never been refused access to any facility based on my past.

Once more, I apologize for my lack of disclosure, this has been quite difficult to reconstruct since many years have passed, I have yet to receive records from the Callaway County Circuit Court, and I have had an attorney act on behalf to no avail. Never was my intent to deceive.

I have raised three sons to work and live as responsible adults, I own my home, and act as POA, and conservator, to my widowed mother. I was her primary care giver until her Dementia progressed such that placement was required. I have coached youth sports; acted as a 4-H leader, and through an alumni association, actively support the Columbia FFA. I attend Mass most Sundays, and have not missed an Election in decades.

REC'D APR 01 2014

The Professional and Community Education Department at the Columbia Area Career Center hired me in September 2013 as an instructor for the Certified Welding Program offered to adult learners. Attached are two letters of reference to Mr. James Sharrock for that hiring process.

Mr. Sharrock has provided a letter of reference for your review, and Mrs. Juanita Gregoire, my treatment counselor, has provided a letter for your review.

I believe that my character is good; my hope is that those that know me would consider me above reproach. I am 55 years old, my wish for the remainder of my working days is to impart the knowledge and wisdom I have gained in 35 years of industry, and 30 years of sober living. There are many lessons that I can offer from each background.

I am sorry for the mistakes of my past, and for failing to apply for my CATC correctly. Please consider me a good candidate as a Career Education Teacher; I enjoy this like no job before.

As always, I remain sincere,

A handwritten signature in black ink, appearing to read "Tom S. Kovacs". The signature is stylized with a large, sweeping initial "T" and "K".

Tom S. Kovacs

REC'D APR 01 2014

[ ] [ ] [ ] **RIVER CITY** [ ] [ ] [ ]  
CONSTRUCTION

August 26, 2013

Columbia Area Career Center  
403 S. Providence Road  
Columbia, Missouri 65203

Attention: Mr. Jim Sharrock

Regarding: Mr. Tom Kovacs  
Instructor Employment

Dear Mr. Sharrock:

I have had the pleasure of working with Mr. Kovacs in the construction industry for the past nine years. Tom has been very professional in all of my dealings with him. He is an honest and hardworking individual. He is a man of integrity. I think that he exhibits the characteristics, knowledge and patience that it will take to be a good instructor.

Please feel free to contact me with any questions you may have.

Sincerely,



John Sutherland  
Vice President

REC'D APR 01 2014

Builders...Concept to Completion.



**TOM SCHAUWECKER**  
Boone County Assessor

August 26, 2013

To Whom It May Concern,

It is my pleasure to recommend Tom Kovacs for employment to the welding instructor position for which he has applied.

I have known Tom since the middle 1970's, having had him as a student in my Vocational Agriculture welding program while teaching in the Columbia Public School District. I had the opportunity to teach in the Columbia School District from July of 1972 until retiring in June of 1998.

I have been able to stay in contact with Tom all through these years and watch him grow his experience and knowledge. There is so many skills he has accomplished in the mechanical trades, construction trades, etc. He also has great personal skills that would be necessary to work with students. Tom was also one of our FFA officers in high school and has maintained contact as an FFA alum, showing interest in our present FFA members success.

I would gladly make myself available to you to answer any further questions or provide other input concerning Tom. Thanks for this opportunity.

Sincerely,

Harold Bossaller, Commercial Staff Appraiser  
Boone County Assessor's Office  
801 E. Walnut  
Columbia, MO 65201  
hbossaller@boonecountymo.org  
573-886-4268

REC'D APR 01 2014



February 28, 2014

Office of Educator Quality  
Conduct Investigations  
PO Box 480  
Jefferson City, MO 65102-0480

To whom it may concern,

It is with great confidence I write this character reference for Tom Kovacs. Tom is teaching and managing the adult evening Welding program at the Columbia Area Career Center for the Columbia Public Schools.

Tom is excellent in the classroom. He serves as a great mentor to our students. He seems to have a special talent in getting through to the students. One student told me a story about how he had worked for days trying to perfect a certain weld. Tom watched over him and then made a few suggestions, the student was proud and excited as he showed me he perfected the weld.

I am aware of Tom's past. Tom is very open about the mistakes he made under the influence of alcohol. However Tom has been sober for over **thirty** years. Tom uses his story as an example to others as to how one can change and have the strength to conquer life's challenges. He has also given to others by sponsoring them on their road to recovery.

Tom is a hard worker and has a passion for teaching trade skills to others. His accomplishments and contributions to others attest to his character. Please feel free to contact me with any questions or concerns.

Sincerely,

Jim Sharrock  
Adult Programs Supervisor

REC'D APR 01 2014

[www.career-center.org](http://www.career-center.org)

The Valley Hope Association...  
 Successfully Treating Alcohol  
 and Drug Addiction  
 Since 1967.



## VALLEY HOPE ASSOCIATION

Alcohol, Drug and Related Treatment Services  
 Kenneth C. Gregoire, Ph.D. President  
 Corporate Offices P.O. Box 510 Norton, KS 67654

[www.valleyhope.org](http://www.valleyhope.org)  
[recovery@valleyhope.org](mailto:recovery@valleyhope.org)  
 A Not For Profit Organization

(800) 654-0486  
 (785) 877-5111  
 FAX (785) 877-2322

Missouri Department of Elementary and Secondary Education  
 Office of Educator Quality  
 Conduct and Investigations  
 Post Office Box 480  
 Jefferson City, MO 65102-0480

February 7, 2014

To Whom It May Concern:

I am writing in response to a request from Tom Kovacs to furnish you with dates of his previous treatment at the Valley Hope Association's Drug and Alcohol treatment facility in Boonville, Missouri, and to provide you with an update on his status following treatment. I was Tom's counselor and am currently the Clinical Director for the Valley Hope Association.

Tom entered treatment at the Boonville Valley Hope residential treatment facility on February 8, 1984. He completed a 30 day treatment program and received a successful treatment discharge. Subsequent contact with Tom over the past 30 years has provided me with the ability to state that he has remained in recovery since that time.

If you require any further information, please do not hesitate to contact me at the Valley Hope Association office, P.O. Box 510, Norton, Kansas, 67654 (785-877-5111).

Sincerely,

Juanita L. Gregoire, M.S.  
 Clinical Director  
 Valley Hope Association

REC'D APR 01 2014

#### VALLEY HOPE ASSOCIATION BOARD MEMBERS

Dave Hill, Chairman  
 Dodge City, Kansas

Pat George, Vice Chairman  
 Baldwin City, Kansas

Ada Arford, Treasurer  
 Norton, Kansas

Michael E. Carr, Secretary  
 Oklahoma City, Oklahoma

Merlynn Colip, M.D.  
 Norton, Kansas

John McClymont  
 Norton, Kansas

Doug Sebelius  
 Norton, Kansas

Jeffrey Wheeler  
 Colorado Springs, CO

Patti Yaussi  
 Lincoln, Nebraska