

SCHOOL DISTRICT NO. 28  
ST. IGNATIUS SCHOOLS  
P.O. BOX 1540  
ST. IGNATIUS, MONTANA 59865

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### Certified Teacher Application Form

PERSONAL INFORMATION (please type or print legibly)

FULL NAME \_\_\_\_\_ SOC. SEC. NO. \_\_\_\_\_  
Last First Middle

ADDRESS \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

POSITION APPLYING FOR \_\_\_\_\_

#### SIGNATURE RELEASE

I certify that all of the information I have provided herein is true, correct, and complete to the best of my knowledge. I authorize School District No. 28 to investigate all statements contained in this application for employment as may be necessary in arriving at an employment decision. The information given by any individual shall be confidential, and I release School District No. 28, my former employers, and all references from any and all liability in obtaining or disclosing such information. I understand that false or misleading information given in my application or interview(s) may result in discharge.

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

#### CERTIFICATED SCHOOL EXPERIENCE

District/School Name	Grade	Years	Full Time/Part Time	Reason for Leaving

#### SUBSTITUTING EXPERIENCE

District/School Name	Grade	Years	Full Time/Part Time	Reason for Leaving

**WORK EXPERIENCE OUTSIDE OF K12 CERTIFICATED EXPERIENCE**

District/School Name	Grade	Years	Full Time/Part Time	Reason for Leaving

**EXTRA-CURRICULAR EXPERIENCE**

Activity	Position	Years	Level (HS, MS, ELEM.)

**SPECIAL SKILLS, QUALIFICATIONS, AND MULTICULTURAL EXPERIENCE**

Summarize special job-related skills, qualifications, and experience obtained working with people of multicultural backgrounds.

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**LIST PROFESSIONAL, TRADE, BUSINESS, CIVIC ACTIVITIES AND OFFICES HELD**

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**CERTIFICATE INFORMATION**

List teaching, administrative, and special certificates held for the State of Montana.

Class/Level	Folio Number	Endorsements	Expiration Date

Have you ever had a certificate revoked or suspended? \_\_\_\_\_ yes \_\_\_\_\_ No

**ACADEMIC INFORMATION**

List in order, schools you have attended.

Name of School	Date	Degree Earned	Major/Minor

**EMPLOYMENT DATA**

Educational level and experience

BA + \_\_\_\_\_ Semester Credits \_\_\_\_\_ Years experience (maximum of five)

Present position or employment status. \_\_\_\_\_

Are you currently under contract for the coming year? \_\_\_\_\_

Have you been convicted of a felony within the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you lawfully allowed employment in this country? \_\_\_\_\_ Yes \_\_\_\_\_ No

**EQUAL OPPORTUNITY EMPLOYER**

School District No. 28 prohibits discrimination against or harassment of any person employed by or seeking employment with the school district because of race, creed, religion, color, political affiliation or national origin, or because of age, physical or mental disability, marital status, or gender when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or gender distinction. People of disability may request reasonable accommodation in the hiring process by contacting the school district personnel office.

**REFERENCES**

List at least three references who are not related to you and are not previous employers.

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_
- 5 \_\_\_\_\_

## Applicant Rights and Consent to Fingerprint

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification<sup>1</sup> by \_\_\_\_\_ that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.<sup>2</sup>

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.<sup>3</sup>

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency.

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at [DOJCRISS@mt.gov](mailto:DOJCRISS@mt.gov) or 406-444-3625.

*Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency.*

Signed:

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Name

Date

<sup>1</sup> Written notification includes electronic notification, but excludes oral notification.

<sup>2</sup> See 28 CFR 50.12(b).

<sup>3</sup> See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

# NCPA/VCA Applicants

To \_\_\_\_\_:

You have applied for employment with, will be working in a volunteer position with, or will be providing vendor or contractor services to (write in Agency or Entity name) \_\_\_\_\_ for the position of (please be specific) \_\_\_\_\_.

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act(VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

1. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).
2. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
3. Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

Your Name: \_\_\_\_\_

First Middle Maiden Last

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City State Zip

I have been convicted of, or am under pending indictment for, the following crimes [include the dates, location/jurisdiction, circumstances and outcome]:

I have not been convicted of, nor am I under pending indictment for, any crimes

I authorize Montana Department of Justice, Criminal Records and Identification Services Section to disseminate criminal history record information to \_\_\_\_\_.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date