Administrator Application Beaverhead County High School

Last Name	First Name	M.I.	Work Phone	Home Phone	
Home Address		City	State	Zip	
Work Address		City	State	Zip	
Education (Underg	raduate and Grad	uate)			
Accredited Institution	i	Dates Attended	Major	Degree Earned	

<u>Please answer the following questions (please type an "X" in the check boxes below):</u>

- 1. Do you have the legal right to work in the United States?
 Yes No
- 2. Are you able to with or without reasonable accommodation, perform the functions of the job for which you are applying?
- 3. Are you currently on, or have you ever been put on administrative leave with or without pay (excluding health related leave)?
 Yes. Please explain _____ No
- Have you ever been released or discharged from employment or resigned to avoid such release or discharge?
 Yes. Please explain
 No

5.	I hereby certify that (check the applicable box below and provide the information requested – please note
	that answers to this question may not necessarily disqualify an applicant from consideration for employment):

I have not plead guilty to, nor have I been	n convicted of any violation of criminal law
(minor traffic offenses excepted).	

☐ I have plead guilty to, or have been convicted of at least one violation of criminal law including criminal convictions resulting from a deferred sentence or a plea of nolo contentere/no contest (minor traffic offenses excepted). *Please attach and sign a complete description of the circumstances surrounding all convictions*.

Employment History: Please list all education-related employment experience, with *most recent employment first.*

Position	School District	Years (From/To)	District Enrollment
Ending date of present	contract	Date availab	ole
Reason for leaving pre	sent position		
Name of supervisor		Supervisor's phon	e
	sed as a teacher in Montana? a copy of your current Monta		with endorsements shown)
Proof of eligibility for	for licensure? Yes No licensure must be provided a acement file to be forwarded	t time of interview)	
References: Please lis	t three or more persons who are	knowledgeable of your pro	ofessional work experience.
Name	Position	City/State	Phone

Community	Service	and	Honors:
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Professional Organizations, Memberships, Offices Held:

If selected as a finalist, I authorize representatives from Beaverhead County High School to contact the following to discuss my qualifications:

References	Yes	No	Professional and Support Staff	Yes	No
Current and Previous Employers	Yes	No	Current and previous Employees	Yes	No
Community Members	Yes	No	Criminal Background Check	Yes	No

Questions: In order to assist us in evaluating your potential for employment with Beaverhead County High School, please answer each of the following questions in two hundred (200) words or less per question on an additional sheet of paper.

- 1. Why do you want to be the Assistant principal at Beaverhead County High School?
- 2. Describe your past experiences in which you have most influenced a school?
- **3.** What do you perceive as your greatest strengths as an educational leader?
- 4. As an assistant principal, what communication approaches are (would be) most effective for you?
- 5. What methods or approaches do (would) you utilize in the decision making process?

Equal Opportunity Employer

Beaverhead County High School prohibits discrimination against harassment of any person employed by or seeking employment with the school district because of race, religion, color, sex, national origin or because of age, physical or mental disability, or genetic information, 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.

Drug Free/Tobacco Free Policies

The school district is a drug free, tobacco free school and, as such, requires all employees to adhere to specific drug free, tobacco free policies.

I hereby certify that all statements made on this application are true, accurate and complete. Any misrepresentation or willful omissions of facts shall be sufficient cause for disqualification of the application or termination of employment. I hereby authorize the Beaverhead County High School District or its agents to conduct work history checks, reference checks and background checks to verify statements on this application form and other materials as provided as part of my employee application. The information gathered through these checks will become part of my permanent employment file.

NOTICE AND ACKNOWLEDGMENT OF PROCESS

I understand that once my application materials have been received by the District for which I am submitting this application, my application materials may be disclosed to the public upon request.

If I am selected as a finalist, my name and other information about me included in my application materials may be disclosed to the public through a press release. I further understand that if I am selected as a finalist, I will be required to submit to a federal criminal background check in accordance with federal law and District policy.

Signature

Date

Please return this application form to: Beaverhead County High School Mr. Gary Haverfield, Superintendent 104 North Pacific Dillon, MT 59725 ghaverfield@bchsmt.com Phone: (406) 683-2361 Fax: (406) 683-5263