



Townsend K-12 School

School District No. 1

201 N. Spruce, Townsend, MT. 59644

Superintendent/Administration Office (406) 441-3454

"Together We Inspire, We Lead, We Excel"

EMPLOYMENT APPLICATION - CLASSIFIED PERSONNEL

IMPORTANT: Please type or print in ink. You must sign and date in ink each application you submit. **INCOMPLETE OR UNSIGNED** applications will not be considered.

PLEASE READ THE JOB VACANCY ANNOUNCEMENT CAREFULLY TO FIND: (a) what attachments must be submitted; (b) where to submit your application; (c) the required special qualifications or licenses; and (d) the closing date for receipt of applications. An application tailored to the position is to your advantage.

Name: _____
Last First Middle Initial

Present Address: _____
Street/P.O. Box City State Zip

Telephone: Home: _____ Cell: _____ Work: _____

PLEASE INDICATE POSITION FOR WHICH YOU SEEK EMPLOYMENT - AS SPECIFIED ON THE JOB VACANCY ANNOUNCEMENT: _____

My signature below certifies that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. Falsifications or misrepresentations may disqualify me from consideration for employment or, if hired, may be grounds for termination at a later date. **Employers may be contacted as references. (Date and sign in ink)**

SIGNATURE: _____ DATE SIGNED: _____

Fingerprint Background Check – Call the Sheriff’s Office at 406-266-3441 to schedule your fingerprints. Bring fingerprint cards back to Townsend School for processing. Cost aprx. \$5.00

Board Policy 5010
Equal Opportunity Employment
It is the policy of the Townsend K12 School District #1 to prohibit discrimination against any individual for reasons of race, creed, religion, color, national origin, age, marital status, sex, political affiliation, disability, and socio-economic conditions. The district shall follow state statutes with respect to discrimination in employment (49-2-303,307, and 310).

FOR DISTRICT USE ONLY
Date Application Received:
Transcripts:
Date of Hire:
Position:
Yrs. of Experience:
Grade: Pay Rate:
Rejection Letter Sent:

COMPLETED EDUCATION

	Name and Location Of School	Dates Attended	Degree Date	Credits Earned	Major Field
High School					
College					
College					

Please list all other Schools or Training Courses Which Will Help You Qualify:

List current Professional Licenses, Registration, or Certifications (engineering, medical, CPA, CPR, etc.)

Licensing Agency Name and Location	Type of License	Endorsement/Restriction (if applicable)	Date Licensed

Special skills: Check the skills you possess. Specify speed/errors where requested.

___ Typing ___/___ ___ Data Entry ___/___ ___ Ten-Key ___/___

___ Other _____

___ Computer Programming Languages (specify) _____

___ Computer Software _____

Equipment: List types of equipment you can operate and specify name or model you have used (e.g., word processor, computers, food service equipment, custodial equipment, etc.)

Work History-Please include Military Service and start with current Employer

Current Employer: Name:_____ Address:_____

City:_____ State:_____ Zip Code:_____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

Former Employer (Begin with most recent)

1. Name:_____ Address:_____

City:_____ State:_____ Zip Code:_____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

May we contact this Employer Yes___No___ Contact Phone Number:_____

2. Name:_____ Address:_____

City:_____ State:_____ Zip Code:_____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

May we contact your Employer Yes___No___ Contact Phone Number:_____

3. Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

May we contact this Employer Yes ___ No ___ Contact Phone Number: _____

4. Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

May we contact this Employer: Yes ___ No ___ Contact Phone Number: _____

5. Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Supervisor	Job Title	Duties	Mo.Yr. to	Mo.Yr.

May we contact this Employer: Yes ___ No ___ Contact Phone Number: _____

NOTE: (1) You may add additional employers to this section on a separate sheet of paper if all questions are answered and the same format is used.

(2) Do you want to be informed before we contact your present employer: ___ Yes ___ No

PERSONAL REFERENCES:(OTHER THAN RELATIVES AND FORMER EMPLOYERS)

Must be complete

Name	Address	City, State, Zip	Telephone

Do you need any accommodation in order to perform the duties of the job you are applying for which are set forth in the job description? If so, what is that accommodation?

Have you within the past seven years been convicted of, or pleaded to, any offense that involves any form of violence, such as assault, rape, child abuse, child molesting, extortion, blackmail, coercion, or any crime which involves drugs?_____ If yes, explain nature of crime, place, and date. (Attach a separate sheet if necessary) _____

Have you within the past seven years been convicted of, or pleaded to, any offense that involved embezzlement, fraud, stealing, robbery, extortion, blackmail, or coercion?_____ If yes, please explain nature of crime, place and date. _____

If required for this position (See Job Vacancy Announcement), do you have:

Valid driver's license? ___Yes ___ No Commercial driver's License? ___Yes ___ No
If commercial, specify: Type___ Class___ Hazardous Material___ Tank ___ Airbrakes

When are you available for work?_____ Do you desire full-time work?___

Will you accept night work?___ Do you wish seasonal or permanent employment? _____

Are you interested in substitute employment? _____

SPECIAL QUALIFICATIONS:

What special work experience, training, or other qualifications do you have which you feel will make you successful in the job you are seeking? (Attach separate sheet if necessary)

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APPLICANT SURVEY

Title VII of the U.S. Civil Rights Act requires the School District No. 1 to “make and keep records relevant to the determinations of whether unlawful employment practices have been or are being committed.” This is also a requirement of the Montana Human Rights Act and state and federal laws providing employment opportunities for veterans and persons with disabilities. The following survey helps to fulfill these requirements.

This applicant survey will be separated from your application. The survey information will be kept confidential, used only for computerized statistical reports and other lawful uses. Analysis of the information you and others provide will be used to monitor recruitment and selection practices in school government.

Because this sheet is separated from your application, please give us your name, address and phone number again. Please answer the following questions. Thank you for your cooperation.

Have you applied for a School District job before? Yes No
Are you a current or past School District employee? Yes No

Name _____
First Middle Last

Mailing Address _____ City/State/Zip _____

E-Mail _____ Home Phone No. _____

Other Phone Number _____ Type _____

Job Applied For: Job Title _____ Location _____

Highest Education Level – Please X the **one** box that best describes your highest education level.

- Less than High School Some College Some Graduate Post-Doctorate
- High School Graduate or Equivalent 2 years of College Degree Master’s Level Degree
- Technical School Bachelor’s Level Degree Doctorate

REFERRAL SOURCE– How did you **FIRST** learn of this position?

- Newspaper Agency Contact (specify below) Job Service
- Internet Listing Phone Inquiry School or Former School Employee
- Career/Job Fair Written Inquiry College Recruitment
- Open House Posted in Agency Building Other
- Walk-In

AGE 18 OR OLDER Yes No **FEMALE** **MALE**

SOCIAL SECURITY NO. This is voluntary and asked for in order to keep your records separate from others who may have the same name. _____

ETHNIC GROUP – Please X the **one** box that best describes your ethnicity.

- AMERICAN INDIAN or ALASKAN NATIVE**
- ASIAN or PACIFIC ISLANDER**
- BLACK** (Not of Hispanic origin)
- SPANISH** (Hispanic)
- WHITE** (Not of Hispanic origin)

MILITARY STATUS – Please X the one box that best describes your military status.

- No Military Service Active Reserves Inactive Reserve Retired Other Veteran

DISABLED VETERAN **YES** **NO**