



# BROCKTON SCHOOL DISTRICT 55-55F

Box 198  
215 North 5<sup>th</sup> Street  
Brockton, MT 59213

(406) 786-3195

Fax: (406) 786-3121



## CLASSIFIED EMPLOYMENT APPLICATION

**INSTRUCTIONS:** Type or print clearly in dark ink. You must answer all questions completely and correctly. Incomplete or unsigned applications will not be considered. Read the job announcement carefully and attach only the information requested. Applications submitted after the closing date will not be considered.

A completed application will be in our active file for one year from the date of this application. An applicant not offered employment should request us to activate the application for the second year if employment is still desired.

### YOUR FILE IS COMPLETED WHEN IT CONTAINS THE FOLLOWING DOCUMENTS:

- |   | Date Received |
|---|---------------|
| 1) Letter of Interest                             | _____         |
| 2) District Application                           | _____         |
| 3) Resume   | _____         |
| 4) Three Letters of References                    | _____         |
| 5) Copy of GED or High School Diploma             | _____         |
| 6) Copy of College Transcripts<br>(If applicable) | _____         |

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

If you are applying for a substitute teacher position, please indicate subjects in which you have strength and are willing to teach: \_\_\_\_\_

Name: Last	First	Middle	Social Security Number
------------	-------	--------	------------------------

Present Address:	Street	City	State	Zip
------------------	--------	------	-------	-----

Permanent Address:	Street	City	State	Zip
--------------------	--------	------	-------	-----

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

\*The phone numbers listed should be where we can contact you during the application process.\*

- Are you available to work? \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Temporary
- When can you begin work? \_\_\_\_\_
- Have you ever been employed by this school district before? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, month and year: \_\_\_\_\_ At what position? \_\_\_\_\_
- Are you presently employed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, where? \_\_\_\_\_
- Are you eligible/authorized to work full time in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No  
(If hired, you will be required to provide proof of U.S. citizenship or alien identification documents entitling you to work.)

## EDUCATIONAL TRAINING

Full information and dates are required

NAME & LOCATION OF SCHOOL	COMPLETED DEGREE OR DIPLOMA	DATE OF GRADUATION	DATES TO FROM	MAJOR	MINOR	TOTAL CREDIT HRS. BEYOND BACHELOR'S DEGREE

Please attach transcripts or proof of education.

## EDUCATIONAL EMPLOYMENT EXPERIENCE

Includes teacher's aide and substitute teaching.

DATES TO FROM	Name of School or College	Location	Grades or subjects taught	Supervisor Name & Number	Number of Years	Reason for leaving

## WORK EXPERIENCE

Include military service and begin with most recent.

1. \_\_\_\_\_  
 (Name) (Address) (Telephone)

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_

---

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_  
 \*\*\*\*\*
  
2. \_\_\_\_\_  
 (Name) (Address) (Telephone)

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_

---

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_  
 \*\*\*\*\*
  
3. \_\_\_\_\_  
 (Name) (Address) (Telephone)

Supervisor's Name: \_\_\_\_\_ Job Title: \_\_\_\_\_  
 Duties: \_\_\_\_\_

---

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

### REFERENCES

Give three references. Include (most recent) supervisors under whom you have worked, who have first-hand knowledge of your character and professional skills.

Name	Address	Home Phone	Work Phone	Official Position

### PROFESSIONAL CONDUCT

1. Since you are applying for a position that involves working with or around children, please complete the following:

Have you ever been convicted of any offense that involves any form of violence, such as assault, rape, child abuse, child molesting, contributing to delinquency of minors, extortion, blackmail, coercion or any crime which involves drugs: \_\_\_\_\_ If yes, please explain the nature of the offense, place and date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Since you are applying for a position that involves handling money and/or school district property, please complete the following:

Have you ever been convicted of any offense that involved embezzlement, fraud, stealing, robbery, extortion, blackmail or coercion? \_\_\_\_\_ If yes, please explain the nature of the offense, place and date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Have you ever had a diploma, credential or license denied, revoked or suspended? \_\_\_\_\_ If yes, explain fully. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Have you ever failed or refused to fulfill an agreement of employment entered into by you with any public agency? \_\_\_\_\_ If yes, explain fully. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Have you ever been dismissed from any public position for immoral or unprofessional conduct, or for unfitness for service? \_\_\_\_\_ If yes, explain fully. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Have you ever been dismissed from any public position for persistent defiance of, or refusal to obey the laws and regulations of the institution or agency? \_\_\_\_\_ If yes, explain fully. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Have you ever been convicted of a felony? \_\_\_\_\_ If yes, explain fully. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IMPORTANT**

Applications will **NOT** be considered unless all information on the application form is completed and all required information is on file.

By policy of Brockton School District 55-55F, your name will be submitted to the Montana ID Bureau for a record check.

The Brockton School District is an Equal Opportunity Employer whose policy it is to follow fair practices in employment, services and treatment of all persons without regard to race, creed, sex, age, national origin or handicap.

I hereby authorize the Brockton School District 55-55F to inquire as to my record with any and all of my references and my former and/or current employers with no liability arising therefrom. I affirm that the statements and facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORIZATION TO RELEASE INFORMATION**

TO WHOM IT MAY CONCERN:

I, \_\_\_\_\_, am seeking administrative employment or volunteer assignment with a Montana School District. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of children. I hereby expressly and voluntarily give the School District and it's agent, the Montana School Boards Association, the right to make a thorough investigation of my past employment, education, and activities. I specifically authorize the release of any and all information of a confidential or privileged nature, including confidential criminal justice information as defined in Section 44-5-103(3), MCA, to the staff of the School District and its agents. I understand that the School District reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release the School District and any organization, company, institution, or person furnishing information to the District and its agents as expressly authorized above, from any liability for damage which may result from any dissemination of the information requested, subject to the provisions of Title 44, Chapter 5, Part 3, MCA.

This document is effective for 180 days or until revoked in writing by me.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Full Name: \_\_\_\_\_  
First Middle Last

Print Full Address: \_\_\_\_\_  
City State Zip

Date of Birth: \_\_\_\_\_ Soc Sec Number: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
County of \_\_\_\_\_ ) : ss.

On this \_\_\_\_ day of \_\_\_\_\_, 200\_\_, before me, a notary public of the State of \_\_\_\_\_, personally appeared \_\_\_\_\_, known to me to be the person named in the foregoing Release, and acknowledged to me that he/she executed the same as his/her free act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year in this certificate first above written.

\_\_\_\_\_  
Notary Public, State of \_\_\_\_\_  
County of \_\_\_\_\_  
My commission expires \_\_\_\_\_

**OPTIONAL - AFFIRMATIVE ACTION INFORMATION - OPTIONAL**

Providing this information is strictly on a voluntary basis. State law requires that employers keep records on the race and sex of applicants and employees to facilitate the enforcement of equal employment opportunity laws. This statement will be filed separately from all other records during the application screening process. As required by state law, it will be available only to the school district personnel department and federal/state employment enforcement officers.

Date: \_\_\_\_\_ Age: \_\_\_\_\_  
Sex: \_\_\_\_\_ Ethnic Group: \_\_\_\_\_

