



# Hysham Public Schools

SCHOOL DISTRICT NO. 1  
115 SUMMIT STREET  
P.O. BOX 272  
HYSHAM, MONTANA 59038

**School Phone**  
(406) 342-5237  
(406) 342-5238  
**Counselor**  
(406) 342-5848  
**Fax**  
(406) 342-5257

## ATTENTION: SCHOOL EMPLOYEES AND BUS DRIVERS

All school staff and bus drivers must have fingerprinting and background checks completed to be in compliance with state laws

Forms are available at the school district office. You can make arrangements with the sheriff's office to complete the fingerprinting card. Return all the forms to the school clerk's office so they can be mailed into the Department of Justice.

1. Fingerprint card. Complete all information and sign. **Please remember to sign in front of a notary.**
2. Release Forms
3. Drivers are subject to driving record searches as well.

Robin S. Weinmeister

District Clerk

February 2024 (jw)

HYSHAM PUBLIC SCHOOLS  
DISTRICT APPLICATION  
PO BOX 272, HYSHAM, MT 59038  
406-342-5237

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Position applying for: \_\_\_\_\_

Do you have a Montana Educators License? \_\_\_\_\_ Yes \_\_\_\_\_ No

Montana Endorsement \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Expiration Date \_\_\_\_\_

Montana Folio Number \_\_\_\_\_

Other State Endorsement \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Expiration Date \_\_\_\_\_

Please answer the following questions:

1. Are you able to, with or without reasonable accommodation, perform the functions of the job for which you are applying? \_\_\_\_Yes\_\_\_\_No
2. Do you have the legal right to work in the United States? \_\_\_\_Yes\_\_\_\_No
3. Have you ever been released or discharged from employment, or resigned to avoid such release or discharge? \_\_\_\_Yes\_\_\_\_No  
If yes, please explain.

4. Are you currently on, or have you ever been put on administrative leave with or without pay (not including health related leave)? \_\_\_\_Yes\_\_\_\_No  
If yes, please explain.

Please note that answer to Question 5 may not necessarily disqualify you from consideration for employment. However, not answering this question in a truthful manner may disqualify you from consideration for employment, nullify a possible offer of employment, or void an employment contract should the District make an offer of employment and/or hire you and later discover that these questions were not answered in a truthful manner (at the discretion of the District).

5. Have you plead guilty to, or been convicted of, at least one violation of criminal law, including convictions resulting from a deferred sentence or plea of *nolo contendere* (no contest) excluding minor traffic convictions. \_\_\_\_Yes\_\_\_\_No  
If yes, please explain.

RECORD OF EMPLOYMENT

Most recent employer \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Position held \_\_\_\_\_

Date of employment including the month and year

From \_\_\_\_\_ To \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Reason(s) for leaving this position

May we contact this employer?  Yes  No

Previous employer \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Position held \_\_\_\_\_

Date of employment including the month and year

From \_\_\_\_\_ To \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Reason(s) for leaving this position

May we contact this employer?  Yes  No

Previous employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Position held \_\_\_\_\_

Date of employment including the month and year  
From \_\_\_\_\_ To \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Reason(s) for leaving this position

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No

Previous employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Position held \_\_\_\_\_

Date of employment including the month and year  
From \_\_\_\_\_ To \_\_\_\_\_

Supervisor's name \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Reason(s) for leaving this position

May we contact this employer? \_\_\_\_ Yes \_\_\_\_ No

Total Number of Years Served As:

Teacher \_\_\_\_\_

Principal \_\_\_\_\_

Superintendent \_\_\_\_\_

Other \_\_\_\_\_

If other, please describe:

EDUCATION BACKGROUND

Highest Degree Earned \_\_\_\_\_

Please list Colleges and/or Universities attended.

<i>College/University</i>	<i>Degree Received</i>	<i>Year</i>	<i>GPA</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

REFERENCES

Please list 5 references

<i>Name</i>	<i>Phone</i>	<i>Email Address</i>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

## VETERAN'S PREFERENCE

The Veterans' Public Employment Preference Act allows applicants to claim preference under this Act. To claim Veterans' Employment Preference you must be a U.S. citizen. Applying for a preference is voluntary. If you would like more information about this Act, contact your local Job Service Workforce Center.

Are you a veteran?  Yes  No

Do you wish to claim Veterans' Employment Preference?  Yes  No

If yes, what were your dates of service? \_\_\_\_\_

What branch of service did you serve? \_\_\_\_\_

Were you separated under honorable conditions?  Yes  No

Did you serve for more than 180 consecutive days of active federal military duty?  Yes  No

Were you a member of the reserves who served on federal military duty during a period of war or in a campaign or expedition for which a campaign badge is authorized?  Yes  No

Were you a member of the Montana Army or Air National Guard who satisfactorily completed a minimum of 6 years service in armed forces, the last 3 years of which have been served in the Montana Army or Air National Guard?  Yes  No

## PROOF OF EMPLOYABILITY

Any applicant chosen for employment must be able to show a social security card, driver's license, or some other acceptable form of verification of employment eligibility in the United States pursuant to Form I-9 of the U.S. Department of Justice.

## EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, the presence of non-job-related condition or handicap, or other legally protected status.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

The applicant understands that neither this document nor any other document from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

I hereby authorize Hysham Public Schools to inquire as to my record with any or all of my former and/or current employers or references with no liability arising therefrom. I hereby guarantee the correctness of the above statements. The making of any false statement herein will be sufficient cause for dismissal. I also authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal.

I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that I will be required to be fingerprinted if offered a contract.

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Signature

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Date

Please note:

By entering your name here, you are signing this form electronically and it is equivalent to having a handwritten signature.