CLASSIFIED PERSONNEL APPLICATION

HIGHLAND JOINT SCHOOL DISTRICT #305

112 Boulevard Ave. - P.O. Box 130, Craigmont, ID 83523 Phone: (208) 924-5211 Fax: (208) 924-5614 Website: www.sd305.org

An Equal Opportunity Employer under Affirmative Action and The Americans with Disabilities Act. Compliance Officer: Tana Kellogg, Superintendent

APPLICANT INFORMATION							
Last		First		Middle Initial			
Street Address		Box No.	<u> </u>				
City		Zip					
Phone	ne Other/Message F						
Other Name(s) under which references or other employe	ou:	E-mail					
POSITION(S) FOR WHICH YOU ARE APPLY	ING						
TOOMON(O) TON WHICH TOO ARE ALTER							
Would you work as a Substitute? Yes	□ No	Which areas:					
Are you legally eligible for employment in U				No			
(Proof of citizenship or immigration status will	be requii	red if employed)					
Are you a Veteran?		No					
Bilingual Skills: Are you bilingual?	☐ Speak ☐ Read ☐ Write						
What Language(s)?							
EMPLOYMENT STATUS							
Are you presently under contract and/or emp	oloyed?	☐ Yes ☐ N)				
When would you be available to start employ	ment? _						
Are you a former employee of the Highland S	School D	istrict? ☐ Yes	□ No				
If so, list dates and positions:							
Have you ever been convicted of a felony?	l _{Yes} □	No If Yes, ple	ease explain below:				
		·	·				
							
Are you currently under investigation by any ed explain below:	ducationa	al or lawenforce	ment agency? Yes	No ☐ No If Yes, please			

	High School			Vocational Training / School				Undergraduate College / University				Graduate Professional				
School Name/Location			<u> </u>	-			,			<u> U</u>		,				
Years Completed (circle last year)	9	10	11	12	1	2	3	4	1	2	3	4	1	2	3	4
Diploma/Degree & Year Of Graduation	-					<u> </u>		•				· · ·				
Date(s) Attended																
Course of Study									<u> </u>							
WORK EXPERIENCE	– PLE	ASE	FILL	IN ALL	FIEL	DS IF	YOU A	RE NO	TA TC	TACH	IING /	A RESI	JME			
Employer										Pho	ne					
Address										Sup	ervisor					
Job Title				Re	spons	ibilities										
From				То						Rea	son Fo	or Leaving	g			
May we contact you	ır <u>pre</u>	•viou	s sul	perviso	or fo	r a ref	ere <u>nc</u>	e?	Yes		o					
Employer										Pho	no			<u> </u>		
Address										Jup	Supervisor					
Job Title				Ke	spons	ibilities										
From				То						Reason For Leaving						
May we contact you	ır pre	viou	s sur	oervisc	or fo	r a ref	erenc	e? 🗆	Yes	□ N	o					
Employer										Phone						
							Supervisor									
Address										Su	pervisc	or				
Address Job Title				Re	spons	sibilities				Su						
				Re		sibilities						or or Leavin	ıg			
Job Title	ır pre	viou	s sur	То)			e? 🗆	Yes		ason Fo		ng			
Job Title From	ır pre	viou	s sut	То)		erenc	e? 🗆	Yes	Rea	ason Fo		ng			
Job Title From May we contact you	ır pre	viou	s sur	То)		erenc	e? -	Yes	Rea	ason Fo	or Leavin	ng			
Job Title From May we contact you Employer	ır pre	viou	s sut	perviso	or fo		erenc	e? □	Yes	Rea	ason Fo	or Leavin	ng			
Job Title From May we contact you Employer Address	ır pre	viou	s sur	perviso	or for	r a refe	erenc	e? □	Yes	Res □ N □ Pho Sup	ason Fo	or Leavin				

	st three <u>profession</u>	nal references not related t	o you.)				
ame	Co	ompany/Address		Phone			
ame	Co	ompany/Address		Phone			
		Company/Address					
ame	Co			Phone			
ease summarize any job	related skills, lice	nses, or certifications you	ı may have th	nat complement the job you are applying			
		COACHING (If Ar	nlicable)				
		COACHING, (If Ap	plicable				
Do you have a current Fir	st Aid Card? Y			ırrent CPR Card? ☐ Yes ☐ No			
		′es □ No Do y	ou have a cu	ırrent CPR Card? ☐ Yes ☐ No			
	ts medicine classe	res □ No □ Doy es? □ Yes □ No If yes	ou have a cu				
Have you taken any sport	ts medicine classe	res □ No Doy es? □ Yes □ No If yes ase briefly list your Coa	ou have a cu , where? ching Expe	rience			
	ts medicine classe	res □ No □ Doy es? □ Yes □ No If yes	ou have a cu				
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	ts medicine classe	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe	rience			
Have you taken any sport	Plea Sport/Activity	Yes ☐ No ☐ Do y Pes? ☐ Yes ☐ No ☐ If yes Pase briefly list your Coa☐ ☐ Dates	ou have a cu , where? ching Expe Dates To	rience			
Have you taken any sport	Plea Sport/Activity	Yes □ No □ Do yes? □ Yes □ No □ If yes ase briefly list your Coa □ Dates □ From	ou have a cu , where? ching Expe Dates To	rience			

To be considered for a position, candidates are required to submit the following:

- \$ Completed Application
- \$ Resume
- \$ Cover Letter
- \$ Three letters of recommendation
- \$ Transcripts as applicable

Notice: Employment will be based on the following procedures unless otherwise noted on vacancy listing:

- 1. Preliminary Screening of applicants will be based on ability to meet job description requirements as evidenced by completed application. Supportive job-related information not on this form nor in credentials may be submitted by the applicant. (Application materials received at the district office more than 10 days after the application deadline will not be accepted.)
- 2. Finalists will be required to attend a personal interview at the district office.
- 3. A Recommendation for Employment will be submitted to the Board of Trustees.
- 4. Notification of Employment will be sent to the candidate.

It is the candidate's responsibility to check on employment status.

THE HIGHLAND SCHOOL DISTRICT IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

The Highland School District prohibits discrimination based on race, color, religion, creed, national origin, gender, sexual orientation, marital status, age, pregnancy, or the presence of a disability, or any other basis prohibited by law. The District is an equal opportunity employer, supports the spirit, policies and practices of affirmative action.

CERTIFICATION, AUTHORIZATION AND RELEASE

I hereby certify that all the information I have provided in this application is true and correct. I authorize the Highland School District to make an investigation of my personal, educational, vocational and/or employment history. I further authorize any current/former employer, person, firm, corporation, educational or vocational institution, or governmental agency to provide the Highland School District with information regarding me. I hereby release and discharge the Highland School District and those who provide information from any and all liability as a result of furnishing and receiving this information.

I further agree that if an offer of employment is made to me, I will provide verification of my certification, education and experience. I understand and agree that falsification of any part of this application shall be sufficient cause for dismissal or refusal to hire. References and personal information which become a part of this application will be regarded as confidential. I understand that any offer of employment that may be made to me is contingent on a criminal history background information check, and approval of the District's Board of Trustees.

Applicant Signature:	_Date: