COLUMBUS SCHOOL DISTRICT 415 North 3rd Street

415 North 3rd Street Columbus, MT 59019 (406) 322-5375

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the superintendent.

Position(s) applied f	or	Date of application			
Referral Source (if a	ny)				
Name			MDDLE		
	LAST	FIRST	MIDDLE		
Address	STREET	CITY	STATE	ZIP	
Telephone No. ()	Other Phone No. ()	Social Security #		
Have you submitted	an application h	ere before? If yes,	give date(s)		
Have you ever been	employed here b	pefore? If yes, gi	ve date(s)		
Are you legally eligi	ible for employn	nent in this country?	Date available for work		
Type of employmen	t desired Full Ti	me Part-Time	Temporary		
Will you relocate if	job requires it? _	Will you tra	vel if job requires it?		
Will you work overt	ime if required?	If no, pleas	e explain	-	
Have you ever been	bonded?			-	
Have you been conv	ricted of a crime	in the last 7 years?	If yes, please explain		
		E A BAR TO EMPLOYMENT. EACH IN		LL BE	
Driver's license nun	nber if driving is	an essential job function	State		

	EMPI	LOYMENT	HISTORY	
Provide the following info	ormation for you	r past and curre	ent employers.	, assignments or volunteer
activities, starting with the				
employment in the comm				
Employer:	Telephone:	From (Date)	To (Date)	Summarize the type of work
1 3	1	, ,	, ,	performed and job responsibilities
A 11		G:	E I	
Address:		Starting Hourly	Ending Hourly	
		Rate/Salary	Rate/Salary	
		rate/Sulary	reace/ Sular y	
Immediate Supervisor and Titl	e			
Reason for leaving:				
May we contact this employer	for a reference? Y	es No	Later	
Employer:	Telephone:	From (Date)	To (Date)	Summarize the type of work
	_			performed and job responsibilities
		~ .		
Address:		Starting	Ending	
		Hourly Rate/Salary	Hourly Rate/Salary	
		Rate/Salary	Raic/Salary	
Immediate Supervisor and Titl	<u>e</u>			
Reason for leaving: May we contact this employer	for a reference? V	es No	Later	
May we contact this employer		es No	Later	
Employer:	Telephone:	From (Date)	To (Date)	Summarize the type of work
				performed and job responsibilities
Address:		Starting	Ending	
		Hourly	Hourly	
		Rate/Salary	Rate/Salary	
Immediate Supervisor and Titl	e			
Reason for leaving:				
May we contact this employer	for a reference? Y	es No	Later	

COMMENTS – Include explanation of any gaps in employment.

SKILLS AND QUALIFICATIONS – Summarize any special training, skills, licenses and/or	
certifications that may qualify you as being able to perform job-related functions in the position for	
which you are applying.	-

EDUCATIONAL BACKGROUND

A. List the last (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable.)

A. SCHOOL	B. YEARS COMPLETED	C. DEGREE/ DIPLOMA	D. GPA/CLASS RANK	E. MAJOR	F. MINOR

REFERENCES

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	YEARS KNOWN

ADDITIONAL INFORMATION

List professional, trade, business, or civic associations and nay offices held. Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability, or any other similarly protected status.

ORGANIZATION	OFFICES HELD

I understand that if I am employed, any misrepresentation or material omission made by me may be cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered. I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurance to the contrary. I further understand that any such assurance must be in writing and signed by an authorized officer.

I understand it is the school's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I further agree to allow the District to conduct a pre-employment background check through the use of fingerprinting, past-employment information checks, Social Security number cross referencing, driver's license information, etc., in order to ensure the safety and welfare of our workplace environment and safeguard the security of our students.

I represent and warrant that I have read and fully understand the forgoi conditions.	ng and see employment under these
Signature of Applicant	Date