

Trout Creek School District #6 4 School Lane Trout Creek, MT 59874 406-827-3629 Fax 406-827-4185

Vanessa Pallister, Supervising Teacher e-mail – tcsprincipal@troutcreekeagles.org

Robert Johnson, District Clerk e-mail – clerk@troutcreekeagles.org

APPLICATION FOR CERTIFIED TEACHER

Position applied for ______ Date: _____

*TROUT CREEK SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER THAT ENCOURAGES APPLICATIONS FROM ALL PERSONS REGARDLESS OF RACE, RELIGION, SEX, AGE, NATIONAL ORIGIN, OR DISABILITY.

Name							
	Last Fi				Middle		
Present Address	Street	City			State Zip Coo		
	Street	City			State Zip Coo	le	
Permanent Add	ress						
	Street	City			State Zip Code		
Telephone Num	nber (H)	(W)		Social Security #			
F		(· ·)					
CERTIFICATION							
	which you hold a valid Mont			ate teaching ce		- mr	
AREA C	OF CERTIFICATION	ISSUSIN	IG STATE		EXPIRATION DATE		
EDUCATION:							
DATE	NAME & ADDRESS O	F INSTITUTION	MAJOR	MINOR	YEAR	DEGREE	
					GRADUATED		
CTUDENT TE	ACHINIC D : : 4 1	1					
	ACHING: Beginning teacher:						
Subjec	ts taught and grade level:						

DATES EDOM/TO	NAME OF EMPLOYER ADDRE		ADDRESS, CI	TY, STATE & ZIP CODE	POSITION
FROM/TO					
May we	TELEPHONE:		1		
contact?					
EXTRA-CURRIC	CULAR ACTIVITIES:				
DATES	NAME OF EMI	PLOYER	ADDRESS, CI	ΓΥ, STATE & ZIP CODE	POSITION
FROM/TO					
May we	TELEPHONE:		-		
contact?					
EXTRA-CURRIC	CULAR ACTIVITIES:				
DATES	NAME OF EMI	PLOYER	ADDRESS CI	TY, STATE & ZIP CODE	POSITION
FROM/TO	TWINE OF EMI	LOTER	ADDRESS, CI	11,517112 & 211 CODE	TOSITION
May we	TELEPHONE:		-		
contact?	TELEFITONE.				
EXTRA-CURRIC	CULAR ACTIVITIES:				
DATES	NAME OF EMI	PI OVER	ADDRESS CI	ΓΥ, STATE & ZIP CODE	POSITION
FROM/TO	TWINE OF EMI	LOTER	ribbitess, er	11,51MIE & ZH CODE	TODITION
May we	TELEPHONE:		-		
contact?	TEEEI HONE.				
EXTRA-CURRIC	CULAR ACTIVITIES:				
DATES	NAME OF EMPLOYER		ADDRESS CI	ΓΥ, STATE & ZIP CODE	POSITION
FROM/TO	TWINE OF EMI	LOTER	ADDRESS, CI	11,517112 & 211 CODE	TOSITION
May we	TELEPHONE:		-		
contact?	ILLEI HONE.				
EXTRA-CURRIC	CULAR ACTIVITIES:				
REFERENCES: 1	References should include s	superintendents, pri	ncipals, or other work i	elated persons who have first-han	d knowledge of
your professional	competence and your pers	onal qualifications.		should include the superintendent	
the two most rece	ent schools in which employ NAME		SITION	ADDRESS, CITY, STATE &	7 7IP CODE
	IVAIVIE	10	SITION	ADDRESS, CITT, STATE 6	e ZII CODE
		TOTAL	EDITORE		
		TELEPHONE			
NAME I		PO	SITION	ADDRESS, CITY, STATE &	& ZIP CODE
		TELEPHONE			
	NAME	NAME POSITION		ADDRESS, CITY, STATE &	& ZIP CODE
		TEL	EPHONE		
		1100		1	

PROFESSIONAL EXPERIENCE: Present or most recent first.

OTHER QUALIFICATIONS:				
Summarize any special job-related skills and qualifications from employment or other experience you feel may be helpful in considering				
your application. i.e. honors, awards, activities, technology skills, or professional development activities.				
BACKGROUND CHECK:				
Background Questions	YES	NO		
1. Have you ever been convicted of, admitted convicting, or are you awaiting trial for any crime (excluding only minor traffic violations not involving any allegation of drug or alcohol impairment)?				
2. Have you ever been dismissed (fired) from any job, or resigned at the request of your employer, or while on				
charges against you or an investigation of your behavior was pending?				
3. Have you ever had any license or certificate of any kind (teaching certificate or otherwise) revoked or				
suspended, or have you in any way been sanctioned by, or is any charge or complaint now pending against you before any licensing, certification or other regulatory agency or body, public or private?				
4. Are you now being investigated for any alleged misconduct or other alleged grounds for discipline by any				
licensing, certification or other regulatory body (teacher certification or otherwise) or by your current or any				
previous employer? If any of the above statements have been answered "yes" explain.				
If any of the above statements have been answered yes explain.				
It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause	e for cancella	tion of this		
application and/or separation from the employer's service if I have been employed.				
I give the employer the right to investigate all references and to secure additional information about me, if job-	related. I her	reby release		
from liability the employer and its representatives for seeking such information and all other persons, corporat				
furnishing such information.				
The employer is an Equal Opportunity Employer. The employer does not discriminate in employment	and no quest	ion on this		
application is used for the purpose of limiting or excusing any applicant's consideration for employment on a b				
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 empl	oyer and still	wish to be		
considered for employment, it will be necessary to fill out a new application.	•			
I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of	this nerson's	need for an		
accommodation that would be required by the ADA.	uns person s	neca for an		
Signature of Applicant Date				

AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN: I, ________, am seeking employment and/or volunteer assignment with the Trout Creek School District. I hereby expressly 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 Trout Creek School District and its agents. I have have not been convicted or adjudicated of any crime in any jurisdiction besides minor traffic offenses. Attached, if necessary, is a complete description of the circumstances surrounding the crime(s) of which I have been convicted or adjudicated in any jurisdiction. I acknowledge that I have the right to obtain a copy of the fingerprint background check obtained by the District and to challenge its accuracy if necessary. I further acknowledge that my access to children may be denied prior to completion of the fingerprint background check. I hereby release the Trout Creek School District and any organization, company, institution, or person furnishing information to the District and its agents as expressly requested, subject to the provisions of Title 44, Chapter 5, Part 3, MCA. A fingerprint background check will be at my expense and will be deducted from the initial paycheck unless other arrangements are made with the District Office. This document is effective until revoked in writing by me. Signature Date Print Full Name Print Full Address City State Zip Code Birth Date Social Security Number STATE OF MONTANA) : County of ______) : SS. On this _____ day of _______, 200___, before me, a notary public of the State of Montana, personally appeared _______, known to me to be the person named in the foregoing Release, and acknowledged to me that ______ executed the same as _____ 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 Montana County of _____ My commission expires

TROUT CREEK SCHOOL DISTRICT #6 IS AN AFFIRMATIVE ACTION EQUAL OPPORTUNITY EMPLOYER

State Law requires that employers keep records on the race and sex of applicants and employees to facilitate the enforcement of Equal Opportunity laws.

This statement will be filed separately from all of your other employment records. As required by state law, it will be available only to the School District Personnel Department and Federal and state Employment Enforcement Officers.

Complete the DISTRICT #	_	and return with your c	ompleted application to TR	OUT CREEK SCHOOL
SEX:	Male	Female	DATE:	
ETHNIC GF	ROUP: CHECK ONE (1) OF THE FOLLOWI	NG.	
			ns in any of the original pe h tribal affiliation or comm	coples of North America and nunity recognition.
			rigins in any of the origina cough tribal affiliation or co	al peoples of North America community recognition.
			origins in any of the orig East. Examples: China, Ja	ginal peoples of the Indian pan. Korea.
	BLACK: (Not of Hi Africa.	spanic Origin) A perso	on having origins in any o	f the Black racial groups of
	FILIPINO: A persor	having origins in any	of the original peoples of th	ne Philippine Islands.
		AN: A person of Mexicor origin, regardless of		Central or South American or
	WHITE: (Not of H Europe, North Africa		rson having origins in any	y of the original peoples of
	OTHER: (Specify)			

YOUR APPLICATION IS INCOMPLETE WITHOUT THIS SHEET.

NONCRIMINAL JUSTICE APPLICANT'S RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification⁸ by Trout Creek School District 6 that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.⁹

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.¹⁰

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at http://www.fbi.gov/about-us/cjis/background-checks.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at dojitsdpublicrecords@mt.gov or 406-444-3625.

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based
background check requests used by the agency for non-criminal justice purposes.
I do □ do not □ want a copy of the Privacy Act Statement.
Signed:
-

Name Date

⁸ Written notification includes electronic notification, but excludes oral notification.

⁹ See 28 CFR 50.12(b).

¹⁰ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).

APPLICATION AND NOTICE PURSUANT TO THE NATIONAL CHILD PROTECTION ACT OF 1993 AS AMENDED BY THE VOLUNTEERS FOR CHILDREN ACT 5122F

To Who	om It May Cond	ern:				
			e working in a volunteer trict) for the position of (p			
Act (VC Code (U	CA), Pub. L. 10 J.S.C.) Section	5-251 (Sections 221 and s 5119a and 5119c, autl	CPA), Public Law (Pub. I 222 of Crime Identification arrives a state and nation with unsupervised access	on Technology Act of nal criminal history b	f 1998), codified at 42 background check to	United States determine the
			ou have applied for emplo aground check. Your righ			
1.	will be used to the resulting re regulation, or	conduct a search of FBI ecord only for the author executive order, or rule,	tand the fingerprint backg criminal history records. ized purpose(s) and will r procedure, or standard es 8 U.S.C. 534(b); 42 U.S.	The district conduct not retain or dissemin tablished by the Nati	ting this background c ate it in violation of fo onal Crime Prevention	heck may use ederal statute, and Privacy
2.	United States foreign govern completed with	Government, a State, po iment, an international in h information concernir	f birth, as appears on a d litical subdivision of a S governmental or an inter g a particular individual 18 U.S.C. §1028(D)(2).	tate, a foreign gover national quasi-gover	nment, a political sub nmental organization	odivision of a which, when
3.	have been con		e not been convicted of a are under indictment or on, if any.			
4.	any information before a final of permits, its off. If the district submitting final http://www.fb.	on contained in any such determination is made by icials may provide you version to policy does not permit in agerprints and a fee .gov/about-us/cjis/backg	the background check report and obtain a protein report and obtain a protein state government age with a copy of your FBI can to provide you a copy to the FBI. Information cound-checks or by contract 59620. 28 CFR, 16.30	ompt determination a ency performing the briminal history record of the record, you mation regarding thi tacting Montana Cr	s to the validity of so background check. If If for review and possi- nay obtain a copy of s process may be	ich challenge district policy ble challenge. the record by obtained at
5.		mpletion of the backgrou	and check, the district mag	y choose to deny you	unsupervised access	to a person to
reasona bears up	ble efforts to moon your fitness	ake a determination whe	shall access and review S ther you have been convic termination to the Board	cted of, or are under p	pending indictment for	, a crime that
Your N	ame:	Midd				
Dota of				Maiden	Last	
Address	S:					

State

Apt.

Zip

Street

City

I have been convicted of, or am u location/jurisdiction, circums	nder pending indictment for, the following crimes [include the dates, tances and outcome]:
☐ I have not been convicted of, nor	am I under pending indictment for, any crimes.
Your signature below acknowledges this echeck requests used by the entity for non-	entity has informed you of your privacy rights for fingerprint-based background criminal justice purposes.
I have been provided with a copy of this for the best of my knowledge and belief.	orm. I have read and understood the foregoing and my certification is true and correct to
Date	Signature of Applicant