



Polson School District #23

ADMINISTRATOR APPLICATION FORM

Name: _____

Last

First

Middle

ADDRESS: _____

Street

City

State

Zip Code

Phone #: _____ Cell # _____ E-mail: _____

Do You Hold a Valid Montana Certificate? _____ Folio # _____ Class _____ Level _____

Is your certification Elementary _____ or Secondary _____

Major Area of Preparation/endorsements _____

Minor Area of Preparation/endorsements _____

PRESENT POSITION: _____

Student Enrollment: _____ Number of Employees Supervised: _____

Administrative: _____ Teachers: _____ Support Staff: _____ Current Salary: _____

Length of Present Contract: _____ Expiration Date: _____

CERTIFICATES: List current teaching and administrative certificates.

Only finalist candidates will be contacted to schedule interviews.

BEFORE A CANDIDATE CAN BE CONSIDERED FOR EMPLOYMENT, THE FOLLOWING MATERIALS MUST BE SUBMITTED BY THE POSTED VACANCY DEADLINE.

1. A properly completed and signed Polson School District application form.
2. Copies of transcripts of all college or university credits to date, (official transcripts required upon hire).
3. College placement papers and/or letters of recommendation (minimum of 3).
4. Montana certification/license-At the time of application for a specific vacancy, provide a copy of valid Montana certification or a STATEMENT regarding your Montana certification eligibility. If hired you must obtain a valid and appropriate Montana Certificate and register it with the county Superintendent of Schools within 60 days.
5. A letter of application (for each position) specifying which position the applicant is requesting consideration. This letter should include a statement indicating specific attributes qualifying you for this position.
6. Professional resume which includes the candidate's academic preparation, experience, and other qualifications which specifically relate to the current District vacancy.
7. Essay, see enclosed attachment

FINGERPRINT BASED CRIMINAL BACKGROUND CHECKS WILL BE CONDUCTED ON ALL NEW EMPLOYEES. The District must have on file a satisfactory report before a new employee begins work.

All application materials submitted by candidates become the Property of Polson School District #23

AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION AND PREPARATION: List in Reverse Order of Attendance

COLLEGE/UNIVERSITY LOCATION DEGREE YEAR

PRIOR PROFESSIONAL EXPERIENCE:

Name and Location Position/Title Dates of Service Name & Phone Number
From To of Supervisor

PERSONAL DATA:

Are you able with or without reasonable accommodation to perform the functions of the job for which you are applying? Yes _____ No _____ If NO please explain:

People of disability may request reasonable accommodation in the hiring process by contacting the personnel office: 111 4th Ave. E., Polson, MT 59860 406-883-6355

Have you ever been convicted or adjudicated (a court issued order, judgment or decree) of any offense beside a minor traffic offense? Yes _____ No _____

If YES, explain the nature of the crime, place, and date of correction or sentence:

Conviction will not necessarily disqualify an applicant from employment. The recentness, severity and pertinence of the conviction to the job will all be considered.

ADDITIONAL PERTINENT INFORMATION, SPECIAL SKILLS, QUALIFICATIONS, LICENSES, CERTIFICATES: Include Computer Skills and Extracurricular Experience.

REFERENCES: References must be current, not older than (3) three years and a minimum of (3) three separate references.

<u>Name</u>	<u>Address</u>	<u>Phone (Home & Work)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pursuant to Administrative Rule of Montana (ARM) 16.28.1005, each District employee must provide verification that the employee has had a tuberculin (TB) test. Verification must include the date of the test, the results of the test, and the signature of the person who conducted the test. It is policy of the Polson School District #23 Human Resource Department to require verification of a TB test from any candidate chosen for employment by Polson School District #23 and to require submitted documentation of the results of a tuberculin test within seven (7) days of employment.

I authorize and request any and all of my former employers and any other reference to furnish to the District, or any agent acting on its behalf, any information they may have concerning my former employers, a history of my employment by them and the reasons for the termination thereof. Moreover, I hereby release each such employer and each such other person from any and all liability of whatever nature by reason of furnishing such information to the District or any agent acting on its behalf. This information will be kept confidential and will not be released to any entity, including the applicant.

All foregoing statements are true and complete. I understand that omission or misrepresentation of material fact may result in refusal of or separation from employment.

Signature: _____ Date: _____

Polson School District #23 has **DRUG FREE AND TOBACCO FREE POLICIES** enforced at all District facilities.

Polson School District #23 is an equal opportunity employer which complies with federal rules and regulations, and does not discriminate on the basis of race, color, age, creed, national origin, religious preference, sex, marital status, or presence of any physical or mental disability, except insofar as such factors are valid occupational qualifications. Federal law obligates Polson School District #23 to provide reasonable accommodation to the known disabilities of applicants, unless to do so would pose an undue hardship. Please feel free to let us know if you need an accommodation to complete the application process. Accommodations are available to the physically challenged for the application process.

Applications may be mailed to:

Polson School District
Human Resource Dept.
111 4th Ave. E.
Polson, MT 59860

History:
Revised 4/12/2013



Polson School District #23

Polson School District Administrative Position Essay Prompt

Please respond to the following prompt in no more than 250 words:

As an instructional leader, how do you balance the demands of implementing instructional best practices and fostering a positive learning environment while establishing relationships with all stakeholders?



Polson School District #23

Equal Employment Opportunity Compliance Form

State law requires that employers keep records on the race, gender and age of applicants and employees to facilitate the enforcement of equal employment opportunity laws.

This form will be filed separately from all of your other applicant or employment records. As required by state law, it will only be available to the Polson School District Human Resource Office and federal and state employment officials.

Date: _____ Gender: _____ Age: _____

Position Applied For: _____

Ethnicity (Check one of the following)

Asian American

American Indian/Alaska Native

Black or African American

Hispanic or Latino

Native Hawaiian or Pacific Islander

White Non-Hispanic

Other: _____



Polson School District #23

Veteran's Employment Preference Form

Name: _____

Position Applied For: _____

To claim preference under the **Montana Veteran's Employment Preference Act** complete this form. Providing the following information is voluntary but must be included with the application in order to claim employment preference. This information will be kept confidential and will only be used during the hiring process to provide the applicant employment preference. Applicants hired by the district will have this information placed in a separate confidential file.

Veteran's Employment Preference provides the addition of 5% (veteran) points or 10% (disabled veteran) points to the applicant's score when a numerically scored selection procedure is used. Whenever a public employer uses a selection procedure other than a scored procedure, the public employer shall give preference to a disabled veteran, eligible relative, or veteran, in that order, over any nonpreferred applicant holding substantially equal qualifications.

To claim **Veteran's Employment Preference** you must be a U.S. Citizen and (check one of the areas below):

- A Veteran, if**
 - You have been separate under honorable conditions from active duty.
AND
 - You have served more than 180 consecutive days of active duty other than for training in the Army, Air Force, Navy, Marines or Coast Guard (not including National Guard or Reserves) or a member of the reserves who served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized.

- A Disabled Veteran, if**
 - You have been separate under honorable conditions from active duty.
AND
 - You have established Armed Forces service connected disability **OR** are receiving compensation, disability retirement benefits or pension from the U.S. Department of Veterans Affairs or military department **OR** you have received a Purple Heart.

- The spouse of a disabled veteran** if the veteran's disability prevents her/him from working.

- The un-remarried surviving spouse of a veteran or disabled veteran**

- The mother of a veteran, if**
 - The veteran died under honorable conditions while serving in the Armed Forces **OR** the veteran has a service connected, permanent and total disability.
AND
 - Your spouse is totally and permanently disabled or you are the un-remarried widow of the father of the veteran.

Check the attachment you have included to document the preference request.

- DD Form 214
- Other: _____

Signature: _____ Date: _____



Polson School District #23

Persons with Disability Employment Preference Form

Name: _____

Position Applied For: _____

To claim preference under the **Montana Persons with Disabilities Employment Preference Act** complete this form. Providing the following information is voluntary but must be included with the application in order to claim employment preference. This information will be kept confidential and will only be used during the hiring process to provide the applicant employment preference. Applicants hired by the Polson School District will have this information placed in a separate confidential file.

The Persons with Disability Employment Preference shall give employment preference to a person with a disability or eligible spouse over any nonpreferred applicant holding substantially equal qualifications at the time of initial hiring with the Polson School District.

To claim the **Persons with Disability Employment Preference** in accordance with 2.21.1427 of the Administrative Rules of Montana you must make a claim in writing and provide a copy of the *Certification for Employment Preference in Public Employment of a Person with Disabilities* issued through the Department of Public Health and Human Services before the closing date of the application process.

To claim the **Persons with Disability Employment Preference** check one of the areas below and attach the *Certification for Employment Preference in Public Employment of a Person with Disabilities*:

Person with Disability

The spouse of a Person with Disability if the spouse has a total disability, is unable to use the preference because of the disability and is married to the eligible spouse in accordance with Montana law.

Signature: _____ Date: _____

Rev. May 21, 2008



Polson School District #23

Tuberculin Test Requirements

Notice:

All new employees hired by Polson School District #23 are required to submit documentation of the results of a Tuberculin Test to the Human Resources office within five working days of their date of hire.

Administrative Rules of Montana (ARM) 16.28.1005: No public or private school as defined in 20-5-405, MCA, or school cooperative may initially employ or continue to employ a person unless that person has provided the school, the cooperative, or the district to which the school belongs with: documentation of the results of a tuberculin skin test done within the year prior to initial employment, along with the name of the tester and the date and type of test administered, unless the person provides written medical documentation that s/he is a known tuberculin reactor, in which case section 6 applies; (refer to ARM 16.28.1005 ii).

Tuberculin tests are given at the Lake County Public Health Department, 883-7288.