

**CERTIFIED STAFF APPLICATION**  
**BON HOMME SCHOOL DISTRICT #04-2**  
**District Office, PO Box 28, 1404 Fir Street, Tyndall, SD 57066**

Name \_\_\_\_\_  
Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Name as it is on Card: \_\_\_\_\_

Position(s) for which you are applying: \_\_\_\_\_  
If we request an interview, when would be most convenient? \_\_\_\_\_

Present Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
At This Address Until \_\_\_\_\_ Email Address \_\_\_\_\_  
Home Telephone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Best time to call \_\_\_\_\_

Place of Employment: \_\_\_\_\_ May we contact you at work? \_\_\_\_ Yes \_\_\_\_ No  
Work Telephone (\_\_\_\_) \_\_\_\_\_ Best time to call \_\_\_\_\_

Permanent Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
At This Address Until \_\_\_\_\_ Email Address \_\_\_\_\_  
Home Telephone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Best time to call \_\_\_\_\_

Teaching Certificate: Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Endorsement(s): \_\_\_\_\_ Teaching Majors: \_\_\_\_\_  
Additional Subjects/Assignments: \_\_\_\_\_  
If you do not have a certificate, will you by September 1? \_\_\_\_ Yes \_\_\_\_ No

List co-curricular activities you may be interested in directing: \_\_\_\_\_

Are you currently under contract with another school district? \_\_\_\_ Yes \_\_\_\_ No  
If yes, expiration date: \_\_\_\_\_ May we contact your present employer? \_\_\_\_ Yes \_\_\_\_ No

Have you applied in Bon Homme #04-2 before? \_\_\_\_ Yes \_\_\_\_ No If yes, date: \_\_\_\_\_  
Were you employed in Bon Homme #04-2 before? \_\_\_\_ Yes \_\_\_\_ No If yes, date: \_\_\_\_\_

Have you been convicted of a CRIME in the last 7 years? \_\_\_\_ Yes \_\_\_\_ No (Conviction may be relevant if job related but does not necessarily bar you from employment). If yes, please explain: \_\_\_\_\_

**BH #04-2 requires a background check (including fingerprinting) through DCI for all new employees immediately after hire.**

Do you have any past or current physical or mental health conditions which may affect the performance of your work?  
\_\_\_\_ Yes \_\_\_\_ No If yes, please explain:

Physical Health \_\_\_\_\_  
\_\_\_\_\_

Mental Health \_\_\_\_\_  
\_\_\_\_\_

Are you a US citizen? \_\_\_\_ Yes \_\_\_\_ No If no, do you have a Green Card? \_\_\_\_ Yes \_\_\_\_ No

Have you ever served in the United States Armed Forces? \_\_\_\_ Yes \_\_\_\_ No  
If yes, indicate branch and discharge date: \_\_\_\_\_

Males born after December 31, 1959, are required to register for Selective Service. Are you registered? \_\_\_\_ Yes \_\_\_\_ No

List information regarding your interests, abilities, activities, and experience which you feel has a bearing on your qualifications for this position.

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Write a statement about why you are interested in teaching at Bon Homme School District #04-2.

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Briefly state your personal philosophy of education.

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**To the Applicant**

A complete application includes a letter of application, resume, credentials, transcripts, and a copy of your South Dakota teaching certificate (if available). Your resume should include references (including student teaching), education, and work experience. If it does not, please list on a separate sheet of paper and attach to this application form. If your credentials do not include a recommendation from your immediate supervisor or cooperating teacher, please have that individual send a letter of recommendation.

We appreciate sincerely the time and interest you have given in making application to the Bon Homme School District. We assure you that your application will receive prompt consideration.

Bon Homme School District is an equal opportunity employer. The Bon Homme School District does not discriminate against any employee on the basis of sex, race, religion, national origin, age, height, weight, marital status, or handicap/disability unrelated to the employee's ability to perform his/her job.

I verify that the information given by me in this application is true, accurate, and complete. I understand that if I have given any false information on this application or if I have omitted any material fact, I may be disqualified from employment with Bon Homme School District, or if hired, I may be discharged upon discovery of such false statement(s) or omission(s). I understand that my employment with Bon Homme School District may be subject to a reference/background check. I hereby authorize Bon Homme School District to investigate the truthfulness of all statements made on this application and/or contact my former employer(s) and other listed reference(s) or any other person(s) who can verify any information submitted to Bon Homme School District in support of my application for employment. I hereby waive any right that I may have against any person contact by Bon Homme School District, including former employers who provide information concerning this application and I release each said person from liability for providing information.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PERSONNEL OFFICE USE ONLY**

Position(s) applied for \_\_\_\_\_ Date(s) \_\_\_\_\_  
Interviewed by \_\_\_\_\_ Date \_\_\_\_\_ Employed: \_\_\_\_\_ No \_\_\_\_\_ Yes Date \_\_\_\_\_

# EMPLOYMENT DATA RECORD

Employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital status, veteran status, medical condition, handicap, or any other legally protected status. As an Equal Opportunity Employer, we comply with government regulations.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information, please note that all Data Records are kept in a Confidential File and are not a part of your Job Application or personnel file.

Please note: Your cooperation is voluntary. Inclusion or exclusion of any data will not affect any employment decision.

## ***VOLUNTARY SURVEY***

Please Print Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First M.I.

Street Address/PO Box: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Current Job: \_\_\_\_\_

Check One:  Male  Female

Age \_\_\_\_\_

Check One Of The Following (Ethnic Origin):

White  Hispanic  American Indian/Alaskan Native  
 Black  Other  Asian/Pacific Islander

Check If Any Of The Following Are Applicable:

Vietnam Era Veteran  Disabled Veteran  Handicapped Individual

## **OFFICE USE ONLY**

Position(s) applied for is open:  Yes  No

Position(s) considered for: \_\_\_\_\_

Date(s) \_\_\_\_\_