MANHATTAN SCHOOL DISTRICT NO. 3
Application for Classified / Coaching / Substitute Teaching Employment

P.O. BOX 425 – 416 N. BROADWAY
MANHATTAN, MT 59741
TELEPHONE: 406-284-6460 / EMAIL: info@mhstigers.org

Manhattan Public School District No. 3 is an Equal Opportunity Employer.

All statements and information provided within this application and its attachments, if any, are true and complete. I understand that omission or misrepresentation of material fact may result in refusal or of separation from employment.

_____ _____
Applicant Signature Date

PLEASE TYPE OR PRINT CLEARLY USING A PEN

Name:_____ SSN:_____

Address:_____ Home Phone:_____

City, State, Zip Code: _____ Other Phone:_____

Email Address: _____

Previous Name/s:_____

Specific position for which you are applying:_____

Other positions in which you are interested or for which you qualify:_____

COACHING APPLICANTS ONLY (Skip this if you are not applying for a coaching position)

Coaching/Advising Interests and Experience:_____

SUBSTITUTE APPLICANTS ONLY (Skip this if you are not applying for a substitute position)

Are you a Certified teacher:_____ in what area:_____

What grades (K-12) are you willing to be a substitute:_____

Any class or subject you do NOT want to be a substitute:_____

Any days/times you are unavailable to substitute:_____

PLEASE ANSWER THE FOLLOWING QUESTIONS:

Do you have the legal right to work in the United States?_____

Are you able with or without reasonable accommodation to perform the functions of the job for which you are applying?____

_____

Have you ever been released or discharged from employment or resigned to avoid such release or discharge?_____

_____

If yes, please explain, include date of discharge or resignation and reason for discharge or resignation:_____

_____

_____

I hereby certify that (check the applicable box and provide the information requested):

_____ I have not pleaded guilty to or have been convicted of any violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere/no contest (minor traffic offenses excepted).

_____ I have pleaded guilty to or have been convicted of at least one violation of criminal law. Please attach and sign a complete description of the circumstances surrounding such conviction. (This may not necessarily disqualify a person from consideration for employment).

Are you claiming Veteran's Preference [ ] Yes [ ] No

ADDITIONAL PERTINENT INFORMATION
QUALIFICATIONS, CERTIFICATES

REFERENCES

Please list current information for at least three and no more than five references below

Name Title Address Phone (home and work)

1. _____

2. _____

3. _____

4. _____

5. _____

EDUCATION HISTORY

List from most recent to least recent attendance

UNIVERSITY / COLLEGE	LOCATION	MAJOR	DEGREE Yes / No	YEAR	GRADE: Above Average Average Below Average

1. _____

2. _____

HIGH SCHOOL	LOCATION	DIPLOMA Yes / No	YEAR	GRADE: Above Average Average Below Average

1. _____

2. _____

EMPLOYMENT RECORD

List your present or most recent employer. Describe your employment history, accounting for all time during at least the last 15 years. You may include volunteer and paid experience. DO NOT substitute a resume. You may attach additional information.

Do you wish to be notified before we contact your current or previous employers? ___Yes ____No

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

_____

_____

Reason(s) for leaving:_____

Salary: _____

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

_____

_____

Reason(s) for leaving:_____

Salary: _____

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

_____

_____

Reason(s) for leaving:_____

Salary: _____

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

Reason(s) for leaving:_____

Salary: _____

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

Reason(s) for leaving:_____

Salary: _____

Employer:_____ Address:_____ Telephone:_____

Your Job Title:_____ Employment Dates (from/to)_____

Immediate Supervisor and title:_____

Job Duties (brief statement – be sure to list all duties related to this position):_____

Reason(s) for leaving:_____

Salary: _____

Equal Opportunity Employer

Manhattan School District No. 3 prohibits discrimination against or harassment of any person employed by or seeking employment with the school district because of race, creed, religion, color, political affiliation or national origin or because of age, physical or mental disability, marital status, or gender when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or ender distinction. People of disability may request reasonable accommodation in the hiring process by contacting the school district personnel office.

Proof of Employability

Any applicant chosen for employment must be able to produce a social security card, driver's license, or some other acceptable form of verification of employment eligibility in the United States pursuant to Form I-90 of the U.S. Department of Justice.

Authorization to Release Employment Records

If employed by a participating school district, the applicant authorizes the school district to supply his/her employment record at the school district's sole discretion, in whole or part, to any prospective employer, government agency, or other party, when the school district's interest is deemed appropriate.

Drug Free/Tobacco Free Policies

Manhattan School District No. 3 is drug free, tobacco free schools and, as such, require all employees to adhere to specific drug free, tobacco free policies.

Acknowledgment

I understand that no offer of benefits, such as, but not limited to, a pension plan, insurance, vacation, or salary rate, is final until it has been reviewed by the personnel/Human Resources Department, and fully approved by the (superintendent/board) or designated authorized representative. Further, I have read and understand the above policies of employment.

_____ _____

Applicant Date

Affirmation Action Information

Providing this information is strictly on a voluntary basis. State law requires that employers keep records on the race and sex of applicants and employees to facilitate the enforcement of equal employment 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 Manhattan School District No. 3 personnel department and federal/state employment enforcement officers.

Complete the following information and return it with your completed application to the Manhattan School District office/s.

Date:_____ Sex:_____ Age: _____ Ethnic Group:_____

Position Applied For: _____

Applicant Rights and Consent to Fingerprint

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 employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification[8] by Manhattan School District that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, 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 employment, 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 https://www.fbi.gov/services/cjis/identity-history-summary-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.

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.

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).

NCPA/VCA Applicants

To _____:

You have applied for employment with, will be working in a volunteer position with, or will be providing vendor or contractor services to Manhattan School District for the position of (please be specific)_____.

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act(VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

1. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).
2. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
3. Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

Your Name: _____
First Middle Maiden Last

Date of Birth: _____

Address: _____

_____
City State Zip

☐ I have been convicted of, or am under pending indictment for, the following crimes [include the dates, location/jurisdiction, circumstances and outcome]:

☐ I have not been convicted of, nor am I under pending indictment for, any crimes

☐ I authorize Montana Department of Justice, Criminal Records and Identification Services Section to disseminate criminal history record information to Manhattan School District.

_____
Signature of Applicant Date