	Pleasa	ant Valley S	School [District #	27
Pleasant Valley	Applic	ation for Cla	ssified E	Employme	ent
ALL SALE	PL	PLEASE TYPE OR PRINT CLEARLY			
School	Today's Date:	Date	Available	for Work:	
	Position Applying For:_				
Name:		Previou	us Name(s	s):	
Address:					
City:		State:		Zip Code	:
Home Phone #:		Cell Ph	ione #:		
Email Address:					
Please circle your a	answers to the following	questions and	t expand,	if necessar	y:
1. Do you have the l	egal right to work in the Ur	nited States?	Yes	Νο	
2. Do you have a hig assessment?	gh school diploma or passi Yes No	ng score on the	egeneral e	ducation de	velopment
-	or without reasonable acc ing? (Please review the jol		•	e functions Yes	of the job for No
4. Have you ever be discharge? Ye	en released or discharged s No	from employm	ent or resiç	gned to avoi	d such release or
If yes, please explain ((include the date of discharge	e or resignation a	and reason	for discharge	or resignation).
	(check the applicable box a question may not necessa	-		•	

□ I have not plead guilty to, nor have I been convicted of any violation of criminal law (minor traffic offenses excepted).

□ I have plead guilty to or I have been convicted of at least one violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contend ere/no contest (minor traffic offenses excepted). *Please attach and sign a complete description of the circumstances surrounding all convictions.

Employment Record

List employment, with your most recent employment first. Describe your employment history, accounting for the last five positions held. You may include volunteer and paid experiences. Do not write "see resume". If you need additional space, please continue on a separate sheet of paper.

Employer:		Pos	ition:	
Address:		City:		State:
Supervisor:	Position:		Phone #:	
Years Employed:	from	to		
Highest Salary: \$	Reason fo	or leaving:		
Work Performed:				
Employer:		Pos	ition:	
Address:		City:		State:
Supervisor:	Position:		Phone #:	
Years Employed:	from	to		
Highest Salary: \$	Reason for leaving:			
Work Performed:				
Employer:		Pos	ition:	
Address:		City:		State:
Supervisor:	Position:		_ Phone #:	
Years Employed:	from	to	·····	
Highest Salary: \$	Reason fo	or leaving:		
Work Performed:				

Employer:		Positio	on:	
Address:		City:		State:
Supervisor:	Position:		Phone #:	
Years Employed:	from	to		
Highest Salary: \$	Reason fo	r leaving:		
Work Performed:				
Employer:		Positi		
Address:				
Supervisor:				
Years Employed:	from	to		
Highest Salary: \$	Reason fo	or leaving:		
Work Performed:				
Employer:		Positio	on:	
Address:		City:		State:
Supervisor:	Position:		Phone #:	
Years Employed:	from	to		
Highest Salary: \$	Reason fo	or leaving:		
Work Performed:				

References

Please list current information for three references below. List persons who are qualified to attest to your fitness for the position you seek who are not related to you and are not previous employers. Do not write "see resume". If you need additional space, please continue on a separate sheet of paper.

Name	Title	Relationship	Email Address	Phone Number

Educational History

List educational institutions in order of attendance (most recent first). Do not write "see resume". If you need additional space, please continue on a separate sheet of paper.

Institution	Location	Degree Earned	Years Attended

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Montana Teacher License

Do you hold a Montana teacher license?	Yes	No	
License number:	Expiration	n Date:	

Equal Opportunity Employer

Pleasant Valley School District prohibits discrimination against or harassment of any person employed by or seeking employment with Pleasant Valley School District because of race, religion, color, sex, national origin or because of age, physical or mental disability, or genetic information, when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or gender distinction. People of disability may request reasonable accommodation in the hiring process by contacting Pleasant Valley School District's personnel office.

Drug Free/Tobacco Free/Nicotine Free Policies

Pleasant Valley School District is a drug free, tobacco free, and nicotine free school and, as such, requires all employees to adhere to specific drug free, tobacco free, and nicotine free policies.

I certify that all statements and information provided within this application and its attachments, if any, are true and complete. I understand and agree, by signing below, that omission or misrepresentation of a material fact, or altering this application form, may result in refusal of my application by Pleasant Valley School District, nullification of a possible offer of employment or termination from employment should Pleasant Valley School District make an offer of employment to me and later discover any such omission or misrepresentation.

Applicant Signature

Date

*All applications must be signed

RESUMES WILL NOT BE ACCEPTED IN LIEU OF COMPLETION OF THIS APPLICATION

Notice and Acknowledgement of Process

Pursuant to Montana's open meeting laws, application materials will likely be reviewed and considered by the Board of Trustees in open session. There are certain recognizable circumstances where individual rights of privacy clearly exceed the merits of public disclosure, thereby allowing the chairperson of the Board of Trustees of a public school to convene in a closed (executive) session should the chairperson make a determination that an individual's right of privacy clearly outweighs the public's right to know. If the chairperson of the Board of Trustees convenes in an executive session to review or consider any information obtained during the hiring process, I acknowledge and agree that the Board may engage in discussion about me without my physical presence.

I understand that once my application materials are given to the Board of Trustees, my name may be disclosed to the public upon request. If I am selected as a finalist, my name and other information about my background and qualifications will be disclosed to the public through a press release.

Applicant Signature

Date

*All applications must be signed

Authorization to Release Information

TO WHOM IT MAY CONCERN:

I, _______, am seeking employment or volunteer assignment with a Montana School District. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of children. I hereby expressingly and voluntarily give the Pleasant Valley School District the right to make a thorough investigation of my past employment, education, and activities. I specifically 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 Pleasant Valley School District and its agents. I understand that Pleasant Valley School District reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release Pleasant Valley School District and any organization, company, institution, or person furnishing information the Pleasant Valley School District and its agents as expressly authorized above, from any liability for damage which may result from any dissemination of the information requested, subject to the provisions of Title 44, Chapter 5, Part 3, MCA.

This document is effective for 180 days or until revoked in writing by me.

Signature			Date	
Print Full Name:				
First		Middle	Last	
Address:		· · · · · · · · · · · · · · · · · · ·		
		City	State	Zip
Date of Birth:		Social Secu	urity Number:	
STATE OF)			
County of	:ss. _)			
On this day of, personally appe	, 20 eared	, before	me, a notary public of the St , known to me to b	ate of be the
person named in the foregoing Release, his/her free act and deed, for the uses ar	and acknowle	edged to me	e that he/she executed the sa	

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year in this certificate first above written.

OPTIONAL - AFFIRMATIVE ACTION INFORMATION - OPTIONAL

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 other records during the application screening process. As required by state law, it will be available only to Pleasant Valley School District personnel department and federal/state employment enforcement officers.

Date:

Employment Preference Form

Name:

Position Applied For:

Employment preference allows applicants to claim a preference under the Veterans' Public Employment Preference Act or the Persons with Disabilities Public Employment Preference Act. Applying for a preference is voluntary. All information related to a preference will be kept confidential and used only during the hiring process. Applicants hired by the state will have this information placed in a separate confidential selection file.

Contact your local Job Service Workforce Center for details on veterans' preference. Contact your local Montana Vocational Rehabilitation Services Office, Department of Public Health and Human Services (DPHHS) for details on obtaining persons with disabilities preference certification.

- 1. To claim Veterans' Employment Preference you must be a U.S. Citizen and (check one of the boxes below):
 - A Veteran, if
 - 1. You were separated under honorable conditions, AND

You served more than 180 consecutive days of active federal military duty other than for training in the Army, Air Force, Nave, Marines, or Coast Guard or were a member of the reserves who served on federal military duty during a period of war or in a campaign or expedition for which a campaign badge is authorized.

- 2. You are or were a member of the Montana Army or Air National Guard who satisfactorily completed a minimum of six years service in armed forces, the last three of which have been served in the Montana Army or Air National Guard.
- □ A Disabled Veteran, if
 - 1. You were separated under honorable conditions from military duty, AND
 - You have an 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 him or her from working.
- □ The unremarried surviving spouse of a veteran or disabled veteran.
- □ The mother of a veteran if,
 - 1. The veteran died under honorable conditions while serving in the Armed Forces, or the veteran has a service-connected, permanent, and total disability, **AND**
 - 2. Your spouse is totally and permanently disabled, **OR** you are the unremarried widow of the father of the veteran.

2. To claim Montana Persons with Disabilities Employment Preference, you must be (check one of the boxes below):

- □ A person with a disability certified by DPHHS, OR
- □ The spouse of a totally (100%) disabled person certified by DPHHS **AND** have resided continuously in Montana for at least one year immediately before applying for employment.

3. In the boxes below, check the attachment you have included to document your eligibility for employment preference.

- DD-214 showing the character of discharge
- □ Service-connected disability letter
- DPHHS Disability Certification
- A document issued by the Office of the Adjutant General of the Montana National Guard certifying service