

Applicant Information

Full Name: _____ Maiden Name (if applicable): _____

Physical Address: _____ Mailing Address: _____

City: _____ ST: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Preferred Method of Contact:

Home Phone Cell Phone Email

Are you a citizen of the United States? Yes No

Have you ever worked for the McLaughlin School District? Yes No If yes, list dates: __/__/__ - __/__/__

Have you ever been convicted of a felony? Yes No If yes, please explain: _____

Position you are applying for (one application per position): _____

If applying for a teaching position, do you possess a valid South Dakota Teaching Certificate? (Please attach copy)

Yes No

If applying for a substitute position, please fill out the next section and proceed. If not applying for a substitute position, skip to the next section.

Position(s) Desired to Substitute For: Teacher Custodian Cook Bus Driver

Day(s) you can substitute: Monday Tuesday Wednesday Thursday Friday

If substituting for a teacher, for which grades would you like to substitute? (Circle all that apply)

Elementary – Pre-Kindergarten, Kindergarten, 1st, 2nd, 3rd, 4th, 5th

Middle School – 6th, 7th, 8th

High School – 9th, 10th, 11th, 12th



Education

Please list any formal education beginning with the most recent. Include all high school, vocational, college and other training. If you need more space, please attach an additional sheet with this application. Note: High School Diploma or equivalent is **required** except for custodial and cook positions.

School: _____ Dates Attended: ___/___ - ___/___

Degree/Diploma: Yes No If yes, date granted: ___/___

Degree/Diploma Awarded: _____

School: _____ Dates Attended: ___/___ - ___/___

Degree/Diploma: Yes No If yes, date granted: ___/___

Degree/Diploma Awarded: _____

School: _____ Dates Attended: ___/___ - ___/___

Degree/Diploma: Yes No If yes, date granted: ___/___

Degree/Diploma Awarded: _____

School: _____ Dates Attended: ___/___ - ___/___

Degree/Diploma: Yes No If yes, date granted: ___/___

Degree/Diploma Awarded: _____

Work and/or Volunteer Experience

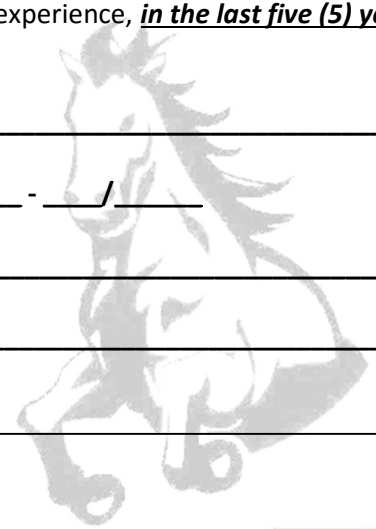
Please list your most recent employment first. Include paid and verifiable not-paid experience, **in the last five (5) years**. If you need more space, please attach an additional sheet with this application.

Employer/School: _____ Employer Phone: _____

Total Years of Experience: _____ Dates Worked: ___/___ - ___/___

Job Title: _____ Supervisor/Principal: _____

Job Duties: _____



Employer/School: _____ Employer Phone: _____

Total Years of Experience: _____ Dates Worked: ___/___ - ___/___

Job Title: _____ Supervisor/Principal: _____

Job Duties: _____

Employer/School: _____ Employer Phone: _____

Total Years of Experience: _____ Dates Worked: ___/___ - ___/___

Job Title: _____ Supervisor/Principal: _____

Job Duties: _____

Military Experience

Pursuant to SDCL 33A-2-1, we give veteran's preference.

Have you served in the military? Yes No

If yes, did you receive an honorable discharge? Yes No

If yes, do you have a service-connected disability? Yes No

Military Branch: _____ Dates Served: ___/___ - ___/___

References

May we contact your current employer for a reference? Yes No

Please list three professional references, who may answer questions concerning your qualifications for employment.

Name: _____ Company: _____

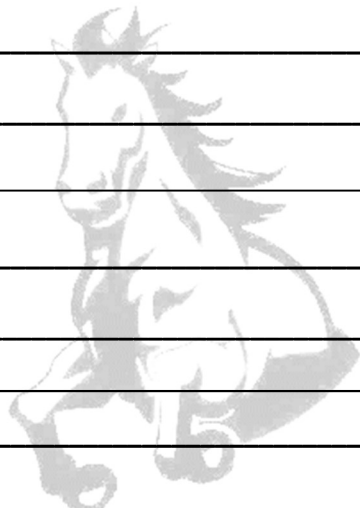
Phone: _____ Relationship: _____

Name: _____ Company: _____

Phone: _____ Relationship: _____

Name: _____ Company: _____

Phone: _____ Relationship: _____



Personal Information

Please add any additional information about yourself, including personal qualities or skills applicable to the position.

Authorization

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein the educational institutions, employers, listed above to give you any and all information concerning my previous employment and any pertinent information that may result from utilization of such information. I understand that if selected, I am subject to state, federal and tribal background checks and drug testing. I also understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. I acknowledge the McLaughlin School District will retain my application on file for six (6) months from the date of receipt, at which point it shall be shredded and a new application will need to be completed.

Signature: _____ Date: _____

** Please return application with cover letter, resume, reference letters and copies of any certifications.*

The Board is committed to a policy of nondiscrimination to race, sex/gender, religion, national background, age, and disability (as disability is defined in federal and state law and regulations). Respect for the dignity and worth of each individual will be paramount in the establishment of all policies by the Board and in the administration of those policies. The Constitutions of our nation and state, pertinent legislation enacted at those two levels of government, as well as court interpretations regarding citizens' rights, undergird this statement. It is the policy of the McLaughlin School District that discrimination based upon race, sex/gender, religion, national background, age, and disability (as disability is defined in federal and state law and regulations) is prohibited. The school district shall:

1. Promote the rights and responsibilities of all individuals as set forth in the state and federal constitutions, pertinent legislation, and applicable judicial interpretations.
2. Encourage positive experiences in human values for children and adults who have differing personal and family characteristics or who come from various socioeconomic, racial and ethnic groups.
3. Carefully consider, in all decisions made which affect the schools, the potential benefits, or adverse consequences that those decisions might have on the human relations aspects of all segments of society.
4. Regularly review all policies and practices of this school district in order to achieve to the greatest extent possible the objectives of this policy.
5. Work toward a more integrated society and to enlist the support of individuals as well as that of groups and agencies, both private and governmental, in such an effort.

The Board's policy on nondiscrimination will extend to students, staff, the general public and individuals with whom it does business.

(Business Office Use Only)

Board Acceptance

Approved

Denied

Date: _____

Background Check Scheduled: Yes No

Date: _____

Background Check Received: Yes No

Background Check Okay: Yes No

