

Somers District #29 Schools Application for Certified Superintendent/Principal/Teaching Employment

PLEASE TYPE OR PRINT CLEARLY USING A PEN

Name: _____
Last First Middle

Address: _____
Street City State Zip

Previous Name/s: _____ Home Phone No: _____
_____ Other Phone No: _____

Specific position for which you are applying: _____

Do you hold a valid Montana Certificate? _____ Folio # _____ Class _____ Level _____

Grades covered by your certificate: K-8 ____ 5-12 ____ 7-12 ____ K-12 ____

Please answer the following questions:

1. Do you have the legal right to accept work in the United States? Yes ____ No ____
2. Are you able with or without reasonable accommodation to perform the functions of the job for which you are applying? Yes ____ No ____
3. Have you ever been released or discharged from employment or resigned to avoid such release or discharge? Yes ____ No ____ If yes, please explain, include date of discharge or resignation and reason for discharge or resignation: _____

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

_____ I have not pleaded guilty to or been convicted of any violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere (minor traffic offenses excepted).

_____ I have pleaded guilty to or 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)

AUTHORIZATION TO RELEASE INFORMATION

I, _____, am seeking employment with the Somers School District. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of the children in the District. I hereby expressly and voluntarily give the 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), and 41-3-205 (3) (0) MCA, to the staff of the District and its agents. I understand that the District reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release the District and any organization, company, institution, or person furnishing information to the 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 provision of Title 44, Chapter 5, Part 3, and Title 41, Chapter 3, MCA.

This document is effective until revoked in writing by me.

Signature: _____

Date: _____

BIRTH DATE: _____

Somers District #29 does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. The following person has been designated to handle inquiries regarding the non-discrimination policies:

Joseph C. Price, Superintendent/Title IX Coordinator
Somers Middle School
315 School Addition Road
Somers, MT 59902
406-857-3661 ext. 202