

# CERTIFIED APPLICATION

## HIGHLAND JOINT SCHOOL DISTRICT #305

112 Boulevard Ave. - P.O. Box 130

Craigmont, ID 83523

Phone: (208) 924-5211 Fax: (208) 924-5614 Website: www.sd305.org

*An Equal Opportunity Employer under Affirmative Action and The Americans with Disabilities Act.  
Compliance Officer: Sarah Hatfield, Superintendent*

Name \_\_\_\_\_  
(Last) (First) (Middle)

Permanent Address \_\_\_\_\_ Phone \_\_\_\_\_  
(Street) (City) (State) (Zip)

Address \_\_\_\_\_  
Until \_\_\_\_ 20 \_\_\_\_ Phone \_\_\_\_\_  
(Street) (City) (State) (Zip)

### PERSONAL DATA

List those extracurricular activities which you feel competent to sponsor or direct:

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List those extracurricular activities which you have sponsored or directed:

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### PROFESSIONAL INTEREST

If you have a valid Idaho Teaching Certificate, complete the following:

State position desired in the School  
District in Order of Preference:

\*1. \_\_\_\_\_

Primary position for which application is made

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Title Certificate : \_\_\_\_\_

Initial Certification Date \_\_\_\_\_

Current Certificate Date \_\_\_\_\_ Exp.Date \_\_\_\_\_

If you do not have a valid Idaho Certificate check here \_\_\_\_  
Where are your credentials on file?

\_\_\_\_\_

\_\_\_\_\_

PLEASE SUBMIT A PHOTOCOPY OF YOUR CURRENT CERTIFICATE (regardless of issuing state).

Are you claiming Veterans Preference? Yes \_\_\_\_\_ No \_\_\_\_\_

**EDUCATIONAL TRAINING** (List in order of attendance)

(Check to indicate class hours)

\_\_\_Semester \_\_\_Quarter

College and/or University	Location	Dates Inclusive	Degree Earned and Date of Degree	Major	Hours	Minor	Hours

**TEACHING AND JOB-RELATED EXPERIENCE**

List most recent experience first - new teachers list cadet teaching - include military if assignment was teaching or instruction.

Name	Employer Location	Superintendent or Supervisor	No of Years	Date From To	Position Held

**REFERENCES**

If you have had teaching experience list - Superintendents and Principals for whom you have taught (most recent first)

Name	Title	Address	Telephone No.	Year

Is there any other name under which recommendations may be listed?

\_\_\_\_\_

## **BACKGROUND**

a) Have you worked for Highland Joint School District before? \_\_\_\_\_. If yes, give dates(s) and your name as it appeared on our payroll records: \_\_\_\_\_

b) Have you ever been convicted of a crime other than a minor traffic violation? \_\_\_\_\_.

c) Have you ever been convicted, been given a suspended sentence or been given a withheld judgment in regard to a crime involving moral turpitude? \_\_\_\_\_.

d) Are you currently under investigation by any educational or law enforcement agency? \_\_\_\_\_.

If yes to question b c, or d, please explain;

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(A yes answer will not necessarily bar you from employment)

***CRIMINAL BACKGROUND AND SEX OFFENDER REGISTRY CHECKS  
ARE REQUIRED FOR EMPLOYMENT***

**ON A SEPARATE SHEET OF PAPER**, please write an explanation, not to exceed 250 words, of your major strengths as they apply to the position for which you are making application.

**TO BE CONSIDERED FOR A POSITION**, candidates are required to submit the following:

- Letter of application
- Resume
- Completed application
- Placement file if available
- Copies of transcripts
- Three letters of recommendation
- Copy of Certificate

**Notice:** Employment will be based on the following procedures unless otherwise noted on vacancy listing:

1. Preliminary Screening of applicants will be based on ability to meet job description requirements as evidenced by completed application, placement files, and transcripts. Supportive job-related information not on this form nor in credentials may be submitted by the applicant. (Application materials received at the district office more than 10 days after the application deadline will not be accepted.
2. Additional Data will be requested from the candidate or from reference after step one, such as letters of recommendation and other information as determined by the district office.
3. Finalists will be required to attend a personal interview at the district office.
4. A Recommendation for Employment will be submitted to the Board of Trustees.
5. Notification of Employment will be sent to the candidate.

It is the candidate's responsibility to check on employment status. Notice of vacancy closings will be remitted to teacher placement centers and district postings only.

## **APPLICANT'S CERTIFICATE AND RELEASE**

*Read Carefully Before Signing*

THIS APPLICATION IS NOT A CONTRACT OF PERMANENT EMPLOYMENT AND CANNOT CREATE ANY SUCH CONTRACT. I UNDERSTAND THAT IF EMPLOYED BY THE SCHOOL DISTRICT, I AGREE TO ABIDE BY ITS POLICIES, RULES, AND REGULATIONS INCLUDING, BUT NOT LIMITED TO, THOSE CONTAINED IN THE HSD POLICY MANUAL AND THE HEA MASTER AGREEMENT.

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for subsequent dismissal if I am hired. I hereby authorize any former employer, person, firm, corporation, or government agency to answer any and all questions and to release or provide any information within their knowledge or records and I agree to hold any or all of them blameless and free of liability for releasing any truthful information that is within their knowledge or records. Indicate by number any of the above employers whom you do not wish us to contact: \_\_\_\_\_.  
This District is also hereby authorized to release to any other firm or person with whom I may seek employment, any and all information concerning my employment or application.

Dated: \_\_\_\_\_ Applicant's Signature \_\_\_\_\_