

# CLASSIFIED PERSONNEL 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*

APPLICANT INFORMATION		
Last	First	Middle Initial
Street Address		Box No.
City	State	Zip
Phone	Other/Message Phone	
Other Name(s) under which references or other employers know you:		E-mail

**POSITION(S) FOR WHICH YOU ARE APPLYING**

**Would you work as a Substitute?**  Yes  No **Which areas:**

**Are you legally eligible for employment in United States?**  Yes  No  
(Proof of citizenship or immigration status will be required if employed)

Are you a Veteran?  Yes  No

**Bilingual Skills:** Are you bilingual?  Yes  No  Speak  Read  Write

What **Language(s)**? \_\_\_\_\_

**EMPLOYMENT STATUS**

- Are you presently under contract and/or employed?  Yes  No
- When would you be available to start employment? \_\_\_\_\_
- Are you a former employee of the Highland School District?  Yes  No

If so, list dates and positions: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you currently under investigation by any educational or law enforcement agency? Yes  No  No If Yes, please explain below:

\_\_\_\_\_

\_\_\_\_\_

EDUCATION/TRAINING				
	High School	Vocational Training / School	Undergraduate College / University	Graduate Professional
School Name/Location				
Years Completed (circle last year)	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree & Year Of Graduation				
Date(s) Attended				
Course of Study				

WORK EXPERIENCE – PLEASE FILL IN ALL FIELDS IF YOU ARE NOT ATTACHING A RESUME			
Employer		Phone	
Address		Supervisor	
Job Title	Responsibilities		
From	To	Reason For Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer		Phone	
Address		Supervisor	
Job Title	Responsibilities		
From	To	Reason For Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer		Phone	
Address		Supervisor	
Job Title	Responsibilities		
From	To	Reason For Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer		Phone	
Address		Supervisor	
Job Title	Responsibilities		
From	To	Reason For Leaving	
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**REFERENCES** (Please list three professional references not related to you.)

<b>Name</b>	<b>Company/Address</b>	<b>Phone</b>
<b>Name</b>	<b>Company/Address</b>	<b>Phone</b>
<b>Name</b>	<b>Company/Address</b>	<b>Phone</b>

Please summarize any job related skills, licenses, or certifications you may have that complement the job you are applying for:

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**COACHING, (If Applicable)**

Do you have a current First Aid Card?  Yes  No

Do you have a current CPR Card?  Yes  No

Have you taken any sports medicine classes?  Yes  No If yes, where? \_\_\_\_\_

Please briefly list your Coaching Experience

School/Organization	Sport/Activity	Dates From	Dates To	Responsibility and/or position title

What is your Coaching Philosophy? \_\_\_\_\_

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**To be considered for a position**, candidates are required to submit the following:

- Completed Application
- Resume
- Cover Letter
- Three letters of recommendation
- Transcripts as applicable

**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. 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. Finalists will be required to attend a personal interview at the district office.
3. A Recommendation for Employment will be submitted to the Board of Trustees.
4. Notification of Employment will be sent to the candidate.

It is the candidate's responsibility to check on employment status.

**THE HIGHLAND SCHOOL DISTRICT IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER**

**The Highland School District prohibits discrimination based on race, color, religion, creed, national origin, gender, sexual orientation, marital status, age, pregnancy, or the presence of a disability, or any other basis prohibited by law. The District is an equal opportunity employer, supports the spirit, policies and practices of affirmative action.**

**CERTIFICATION, AUTHORIZATION AND RELEASE**

I hereby certify that all the information I have provided in this application is true and correct. I authorize the Highland School District to make an investigation of my personal, educational, vocational and/or employment history. I further authorize any current/former employer, person, firm, corporation, educational or vocational institution, or governmental agency to provide the Highland School District with information regarding me. I hereby release and discharge the Highland School District and those who provide information from any and all liability as a result of furnishing and receiving this information.

I further agree that if an offer of employment is made to me, I will provide verification of my certification, education and experience. I understand and agree that falsification of any part of this application shall be sufficient cause for dismissal or refusal to hire. References and personal information which become a part of this application will be regarded as confidential. I understand that any offer of employment that may be made to me is contingent on a criminal history background information check, and approval of the District's Board of Trustees.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_