

CERTIFIED APPLICATION

Lodge Grass Public Schools
School Districts 2 & 27
Big Horn County
Drawer AF
Lodge Grass, MT 59050

An equal opportunity employer that encourages applications from all persons regardless of race, religion, sex, age, national origin or handicap.

APPLICATION OF:

LAST NAME

FIRST

MIDDLE INITIAL

PRESENT ADDRESS:

STREET

CITY

STATE & ZIP CODE

PERMANENT ADDRESS:

STREET

CITY

STATE & ZIP CODE

TELEPHONE NUMBER:

SOCIAL SECURITY NUMBER:

GENERAL INFORMATION:

WHAT POSITION YOU ARE APPLYING FOR:

MAJOR AREA OF PREPARATION

MINOR AREA OF PREPARATION

WHEN CAN YOU BEGIN WORK?

ARE YOU CURRENTLY UNDER CONTRACT

DATES OF CONTRACT

HAVE YOU HAD EXPERIENCE WORKING WITH NATIVE AMERICAN STUDENTS?

_____, IF SO, PLEASE DESCRIBE THE SETTING.

COMPLETED EDUCATION:				
NAME & LOCATION OF SCHOOL	COMPLETED DEGREES	DATE GRADUATED	QUARTER HOURS	CUMILATIVE GPA

STUDENT TEACHING EXPERIENCE: (Beginning Teachers Only)		
NAME AND LOCATION OF SCHOOL	DATES	LEVEL OF EXPERIENCE AND SUBJECTS TAUGHT

TEACHING EXPERIENCE: (Do not list substitute teaching, instructional aide work, or student teaching. List only contracted teaching experience.)				
NAME AND LOCATION OF SCHOOL	DATES	# OF YEARS	GRADES & SUBJECTS TAUGHT	EXTRA- CURRICULAR ACTIVITIES

**PERSONAL REFERENCES:
(OTHER THAN RELATIVES AND FORMER EMPLOYEES)**

NAME	ADDRESS	CITY, STATE, ZIP	PHONE NO

MAY WE CONTACT YOUR REFERENCES, INCLUDING YOUR PRESENT EMPLOYER FOR RECOMMENDATIONS?

_____ YES _____ NO (IF NO, PLEASE EXPLAIN:

CERTIFICATION:

DO YOU HOLD A VALID MONTANA CERTIFICATE? _____

FOLIO NUMBER _____

CLASS OF CERTIFICATE _____

LEVEL OF CERTIFICATE _____

EXPIRATION DATE _____

ENDORSEMENTS _____

If you do not hold a MT certificate, contact Teacher Certification, Office of Public Instruction Helena, MT 59601. Furnish information to this office regarding your certification as soon as it is received. LGPS does not resume any responsibility for your certification. Failure to register your teaching certificate in the County Supt. of Schools office within the first 60 days of teaching will result in the District holding any further wages until your certificate is registered.

IMPORTANT: Applications will not be eligible for consideration unless all requested information is on file. It is your responsibility to request your college or university to provide this office with transcripts and a placement file. All information on the application form should be accurately completed. **AN AUTOBIOGRAPHICAL SKETCH COVERING YOUR PROFESSIONAL CAREER SHOULD BE ATTACHED.**

I HEREBY AUTHORIZE LODGE GRASS SCHOOL DISTRICTS 2 & 27 TO INQUIRE AS TO MY RECORD WITH ANY OR ALL OF MY FORMER AND/OR CURRENT EMPLOYERS OR REFERENCES WITH NO LIABILITY ARISING THEREFROM. I HEREBY GUARANTEE THE CORRECTNESS OF THE ABOVE STATEMENTS. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL.

_____ SIGNATURE

_____ DATE