

GALLATIN GATEWAY SCHOOL

Employment Application

Which position are you applying for: \_\_\_\_\_

PERSONAL DATA

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Previous Name: \_\_\_\_\_ Last 4 digits of SSN: \_\_\_\_\_

Present Address: \_\_\_\_\_

*Street/P.O. Box City State Zip Code*

Email: \_\_\_\_\_

Are you a certified teacher? If yes, list state(s): \_\_\_\_\_

SEID#: \_\_\_\_\_

Endorsement(s): \_\_\_\_\_

EDUCATION

High School Diploma/GED/HiSET? YES \_\_\_\_\_ NO \_\_\_\_\_

High School: \_\_\_\_\_ State: \_\_\_\_\_

College: \_\_\_\_\_ Degree/ Major: \_\_\_\_\_ Year: \_\_\_\_\_

College: \_\_\_\_\_ Degree/ Major: \_\_\_\_\_ Year: \_\_\_\_\_

College: \_\_\_\_\_ Degree/ Major: \_\_\_\_\_ Year: \_\_\_\_\_

Highest Degree Earned: \_\_\_\_\_

ADDITIONAL INFORMATION

Other relevant experience, licenses, certificates, special skills, and volunteer work, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMPLOYMENT EXPERIENCE *(List most recent work experience first.)*

Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Description: (duties, skills, equipment used):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Description: (duties, skills, equipment used):

\_\_\_\_\_

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Dates: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Position: \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Description: (duties, skills, equipment used):

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Dates: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

(Attach additional sheets if necessary to include at least the last five years of work history.)

#### REFERENCES

*(Provide current information. Individuals may not be family members or relatives and should be other than those who have submitted written letters of reference.)*

Name	Location	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____

You may also attach reference letters.

Do you want to be informed before we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

#### CERTIFICATION *(Please answer the following questions.)*

Do you have the legal right to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you able with or without reasonable accommodation to perform the functions of the job for which you are applying?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been released or discharged from employment or resigned to avoid such release or discharge?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain. Include the date of discharge or resignation and the reason for discharge or resignation.

Has any employer ever subjected you to disciplinary action, suspended, terminated, or asked you to leave a job or volunteer position on the grounds of any unlawful sexual behavior or violation of an employer's sexual misconduct or harassment policy?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain.

Are you presently being investigated or under a procedure to consider your discharge for misconduct by your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain.

Check the applicable blank and provide the information requested as necessary.

I hereby certify that:

\_\_\_\_\_ I have not pleaded guilty to or have been convicted of any violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere/no contest (minor traffic offenses excepted).

\_\_\_\_\_ I have pleaded guilty to or have 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 from employment.)

With my signature below, I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I understand that omission or misrepresentation of material fact or altering this application form may result in refusal of or separation from employment. I authorize all former employers to release job-related information they may have about me.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return completed applications to:**

**Gallatin Gateway School**

**100 Mill Street**

**Gallatin Gateway, MT 59730**

**(406) 763-4415**

**Or by email at:**

**[district-clerk@gallatingatewayschool.com](mailto:district-clerk@gallatingatewayschool.com)**

**Office Use Only**

(Application) Date Received: \_\_\_\_\_ Identification Verified: \_\_\_\_\_ Other: \_\_\_\_\_

(Background Check) Form Received: \_\_\_\_\_ Date Requested: \_\_\_\_\_

Date Received: \_\_\_\_\_