



**MT. ANGEL SCHOOL DISTRICT  
EMPLOYMENT APPLICATION  
Coaching Position**

Mt. Angel School District 91 ♦ P.O. Box 1129 ♦ 730 E Marquam Street ♦ Mt. Angel, Oregon 97362  
Phone: 503.845.2345 ♦ Fax: 503.845.2789 ♦ Website: [www.masd91.org](http://www.masd91.org)

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**Applicant Personal Information**

Name \_\_\_\_\_  
Last First Middle Initial (other name used)

Are you a member of Oregon PERS? [ ] Yes [ ] No

Mailing Address

\_\_\_\_\_  
Street City State Zip

Street Address (if different)

\_\_\_\_\_  
Street City State Zip

Daytime Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

First Aid Card (required for employment) [ ] Yes (attach copy) [ ] No (will be obtained by \_\_\_\_\_)

**Sport(s)/Position(s) Interested In (check one or more)**

Sport	Varsity	Junior Varsity	Middle School	Head Coach	Assistant Coach
Football					
Volleyball					
Cross Country					
Boy's Basketball					
Girl's Basketball					
Wrestling					
Baseball					
Softball					
Track					
Golf					

**Educational Information**

High School Graduate [ ] Yes [ ] No      GED [ ] Yes [ ] No

**Post Secondary Education**

Name of Business/Trade School, College or University	No. of Years Attended	Type of Training or Major	Type of Certificate or Degree Received

**Veteran Status**

Are you a 'Veteran' as defined under Oregon law (ORS 408.225(3))? If you answer yes to this question, your service record should be reflected in the Employment Record section of your application.  Yes  No

Are you a 'Disabled Veteran' as defined under Oregon law (408.225(c))? If you answer "yes" to this question, your service record should be reflected in the Employment Record of your application.  Yes  No

**Employment Record**

**Present Employer**

Employer	Address
Your Job Title	Supervisor's Name: Title: Phone:
Dates of Employment: _____ from _____ to _____ Total Time: _____ years _____ months	
Specific Duties: _____ _____ _____	
May we contact this employer? [ ] Yes [ ] No	

### Coaching Experience

Employer: Address: Phone:	Position:
Dates of Employment: from _____ to _____	
Specific Coaching Duties:	
Reason for Leaving:	

Employer: Address: Phone:	Position:
Dates of Employment: from _____ to _____	
Specific Coaching Duties:	
Reason for Leaving:	

Employer: Address: Phone:	Position:
Dates of Employment: from _____ to _____	
Specific Coaching Duties:	
Reason for Leaving:	

Employer: Address: Phone:	Position:
Dates of Employment: from _____ to _____	
Specific Coaching Duties:	
Reason for Leaving:	

If further coaching experience, please attach additional sheet or include on resume.

## References

(Please give at least three references of persons who have first-hand knowledge of your work skills, character and personality.)

Name	Address	Occupation	Phone

I hereby certify that the information contained in this application is a true and complete statement of my personal record to date. I also give consent to share the contents of my application file with all members of the screening committee. I understand that if employed, false statements on this application shall be considered sufficient cause for immediate dismissal.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

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## Equal Opportunity Information

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Mt. Angel School District is an equal opportunity employer and complies with all applicable state and federal statutes and regulations in employment and school district programs.

### Drug-Free Workplace

Mt. Angel School District is committed to maintaining a drug-free workplace and complies strictly with all applicable state and federal statutes and regulations in employment and school district programs.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Position for which you are applying

**If you prefer not to provide the information requested below, please sign and date.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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## Voluntary Information

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This information is voluntary and is collected only for Equal Employment Opportunity reporting purposes. This form will be physically separated from your other application materials and will not affect the application process in any manner. Should you prefer not to provide this information, there will be no effect on your application.

**Race or cultural group** (please check only one):

White     Hispanic     Native American     Black     Asian     Other \_\_\_\_\_

**Sex:**             Male             Female

**Date of birth:** \_\_\_\_\_



## Mt. Angel School District Criminal Background Records Check

You must respond to each question with accurate and honest information. Failure to provide information or providing inaccurate information will result in the denial of your application. If you are already employed/volunteering and it is determined that you have provided incomplete or inaccurate information, this determination will result in your termination as an employee/volunteer.

\_\_\_\_\_  
Please print your full and complete name

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Place of Birth (City & State)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Drivers License #

\_\_\_\_\_  
State Issued

List any other names you have used:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

Your home address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Ph. #: \_\_\_\_\_

List any other States you have lived in other than Oregon and the times in which you lived there: (If additional space is needed, use the Comments section of Page #2)

\_\_\_\_\_  
State

\_\_\_\_\_  
Year(s)

\_\_\_\_\_  
State

\_\_\_\_\_  
Year(s)

\_\_\_\_\_  
State

\_\_\_\_\_  
Year(s)

\_\_\_\_\_  
State

\_\_\_\_\_  
Year(s)

Have you ever been arrested for or charged with a crime? [ ] Yes [ ] No

*\*Note\* Actions taken by you or by others on your behalf, to Expunge, Set-Aside or clear records of arrest or prosecution **Does Not** remove your obligation to respond honestly to this question. (If additional space is needed, use the Comments section of Page #2)*

\_\_\_\_\_  
Crime

\_\_\_\_\_  
Year

\_\_\_\_\_  
Location (City & State)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Crime

Year

Location (City & State)

Have you ever been under Court Order prohibiting your contact with a person or place, such as a Restraining Order. Stalking Order or a "No Contact Order? [ ] Yes [ ] No

If Yes, what was the nature of the action and where and when did this take place?

Nature (such as Restraining or Stalking Order)

Location (City & State)

Year

Nature

Location (City & State)

Year

Have you ever had your driving privileges revoked or suspended in this or any other State? [ ] Yes [ ] No

Reason why Suspended or Revoked

Location (City & State)

Year

Reason why Suspended or Revoked

Location (City & State)

Year

Is there any information that you wish the Background Investigator or the District to consider regarding any of your responses on this document or about any information that will be discovered during the investigation?

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

(Print your name on first line and sign and date at the bottom of this authorization for release of information)

I \_\_\_\_\_, state that all the information on this form is accurate and complete and is provided in good faith. Through my signature below I authorize the Mt. Angel School District and its representative to investigate this information. Further, with my signature I give irrevocable consent to all governmental agencies, public or private companies and individuals to release information regarding me to the Mt. Angel School District and to their representative, Criminal Information Services.

Signature

Date



## Mt. Angel School District Employee Background Information

Please check correct answer. IF IN DOUBT, EXPLAIN YOUR ANSWER

Have you ever left any employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct or alleged violation of professional standards of conduct, or when you had reason to believe such investigation was imminent?  YES  NO

Are you currently the subject of an inquiry, review or investigation for alleged misconduct or alleged violation of professional standards of conduct?  YES  NO

Have you ever failed to complete a contract in any position, or for any alleged misconduct or alleged violation of professional standards of conduct been placed on leave by your employer or left such employment prior to end of the contract term?  YES  NO

Have you ever had a professional certificate, credential or license (of any kind) revoked or suspended, or have you been placed on probationary status for any alleged misconduct or alleged violation of professional standards of conduct?  YES  NO

Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct or alleged violation of professional standards of conduct?  YES  NO

Have you ever surrendered a professional license of any kind before its expiration?  YES  NO

Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure?  YES  NO

***The Mt. Angel School District is an Equal Opportunity employer and educator.***

Have you ever been convicted or been granted conditional discharge by any court for (a) any felony, (b) misdemeanor, or (c) any major traffic violation such as; driving under the influence of intoxicants or drugs, reckless driving, fleeing from or attempting to elude a police officer, driving while your license was suspended, revoked or used in violation of any license restriction, or failure to perform the duties of a driver or witness at an accident?

YES  NO

Have you ever entered a plea of *guilty* or *no contest* relative to any charge for an offense listed in the question above?

YES  NO

Have you ever had any civil judgment or other entered against you resulting from abuse, assault, battery, harassment, intimidation, neglect, stalking or other threatening behavior toward other persons?

YES  NO

***If yes, please explain.***

**Note: If you answered yes to any of the questions above, please fully explain your answer(s) on a separate sheet of paper.**

*I understand that any omission on this form may prevent my application from being evaluated or considered for a position in the Mt. Angel School District. I authorize Mt. Angel School District to obtain information about my criminal records. I authorize governmental agencies to provide information about my criminal records to the district. I verify that all information on this form, and on my application, is true and complete. I understand that any misrepresentation, falsification or omission on this form or on other documents submitted to the school district will be sufficient cause for my application not to be considered by the district, or for discharge if I have been employed.*

Print Full Name: \_\_\_\_\_

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

***Mt. Angel School District is an Equal Opportunity employer and educator.***

## AUTHORIZATION TO CHECK WORK HISTORY AND RELEASE OF PRIOR EMPLOYERS

I authorize Mt. Angel School District to check my references and to investigate any information provided in my application for employment. I further authorize my past employers or anyone with information about my work history, education or qualifications to provide such information to Mt. Angel School District in response to their inquiry. I agree to hold harmless from any liability (suit, claim or other action) anyone supplying such information to Mt. Angel School District.

Signed:

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Date

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