

MT. ANGEL SCHOOL DISTRICT EMPLOYMENT APPLICATION - CLASSIFIED



Mt. Angel School District 91 ♦ P.O. Box 1129 ♦ 730 E. Marquam St ♦ Mt. Angel, Oregon 97362
Phone: 503.845.2345 ♦ Fax: 503.845.2789 ♦ Website: www.masd91.org

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 _____

Desired Employment

Position Being Applied For _____

Date of Application _____ Date of Availability _____

Applying for (check all that apply) Full Time Part Time Substitute Other _____

Are you employed currently? Yes No If so, may we contact your current employer? Yes No

How did you learn of this vacancy? _____

Educational Information

High School Graduate Yes No

GED Yes No

Post Secondary Education

Name of Business/Trade School, College or University	No 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 or Last Employer

Employer	Address
Your Job Title	Supervisor's Name: Title: Phone:
Dates of Employment: from _____ to _____ Total Time: _____ years _____ months	
Specific Duties: _____ _____	
Reason for Leaving: _____	

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Your Job Title	Supervisor's Name: Title: Phone:
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Your Job Title	Supervisor's Name: Title: Phone:
Dates of Employment: from _____ to _____ Total Time: _____ years _____ months	
Specific Duties:	
Reason for Leaving:	

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

Special Skills and Licenses (Complete if applicable to the position for which you are applying.)

Bilingual Skills	Yes	No	Please Detail
Spanish			
Russian			
Other			
Office Experience/Skills			
Computer			
Typewriter			
Adding Machine			
Telephone			
Receptionist			
Secretary			
Accounting/Bookkeeping			
Payroll			
Any Special Certificate or License?			Please detail:
Maintenance Experience/Skills	Yes	No	Please Detail
Custodial			
Painting			
Heating			
Plumbing			
Electrical			
Grounds			
Any Special Certificate or License?			Please detail:
Commercial Driver's License?			

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

Equal Opportunity Information

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

Voluntary Information

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 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

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**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:

