BAINVILLE SCHOOL

409 Tubman PO Box 177 Bainville, MT 59212 Non Certified Employment Application



APPLICANT INFORMATION														
Last Name				First					M.I. Date					
Street Address										Apartment/I	Unit #			
City				State					ZIP					
Phone				E-mail	E-mail Address									
Date Available Social Se				ecurity No.				Des	Desired Salary					
Position Applied for														
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO														
Have you ever worked for this company? YES \(\square\) NO \(\square\) If so, when?														
Have you ever been convicted of a felony? YES □ NO □ If yes, explain														
EDUCATION														
High School				Address										
From	То	Did you g	raduate?	YES	NO [☐ Degree								
College	e			Address										
From	То	Did you graduate?			NO Degree									
Other				Address										
From	То	Did you graduate?			NO Degree									
REFERENCES														
Please list three professional references.														
Full Name					Relationship									
Company						Phone ()								
Address														
Full Name						Relationship								
Company						Phor	ne	()					
Address														
Full Name						Relationship								
Company						Phor	ne .	()					

PREVIOUS EM	PLOYMENT								
Company			Phone ()						
Address			Supervisor						
Job Title		Starting Salary	\$		Ending Salary \$				
Responsibilities									
From	То	Reason for Leaving							
May we contact y	our previous super	visor for a reference?	NO 🗆						
Company			Phone ()						
Address		Supervisor							
Job Title			Starting Salary	\$		Ending Salary \$			
Responsibilities									
From	То	Reason for Leaving	I						
May we contact y	our previous super	visor for a reference?	NO 🗆						
Company			Phone ()						
Address			Supervisor						
Job Title		Starting Salary	\$		Ending Salary \$				
Responsibilities									
From	То	Reason for Leaving	I						
May we contact your previous supervisor for a reference? YES NO									
	TA AND QUAL	FICATIONS							
General Health:					ysical examination may be required before beginning work.				
If you have any physical limitations which require any special environmental accommodations not ordinarily found in schools, please describe these:									
DISCLAIMER AND SIGNATURE									
I certify that my answers are true and complete to the best of my knowledge.									
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.									
I understand that in filing this application that my work experience, character, and related information is subject to investigation to determine the desirability of my employment in the Bainville School District. This information will be kept confidential. I grant permission for such an investigation to be conducted. I also understand that any falsification of information given on this application will result in loss of employment.									
Signature						Date			