



Application for Employment

St. Labre Indian Catholic School
PO Box 77
Ashland, MT 59003
(406) 784-4500 Fax (406) 784-4546

Pretty Eagle Catholic School
PO Box 257
St. Xavier, MT 59075

St. Charles Mission School
PO Box 29
Pryor, MT 59066

Positions for which you are applying: _____ Date: _____
_____ Date: _____

PERSONAL DATA

First Name _____			Middle _____		Last _____	
Home Address _____		City _____	State _____	Zip _____	Home Telephone _____	
Work Address _____					Message Phone _____	
Social Security #: _____ - _____ - _____			(If hired, you must provide proof of identity)			
Have you ever been convicted of a felony? _____ If so, attach detailed explanation.						
Available For (Check all that apply):						
___ Full-Time	___ Part-Time	___ Temporary	___ Days	___ Evenings	___ Weekends	
Date Available: _____						
Other names used in employment? _____						
How did you learn of this opening? _____						
Do you know anyone employed at St. Labre? ___ Yes ___ No						
If yes, who? _____						
Have you worked for St. Labre, Pretty Eagle, and/or St. Charles before? ___ Yes ___ No						
Age, <u>if</u> under 18: _____ (For Child Labor Law purposes only)						
For Hiring Preference Only.						
Are you Roman Catholic? ___ Yes ___ No						
___ I am a Native American living on or near an Indian reservation. (You may be required to provide proof of Native American status)						

For Office Use Only:

Transcripts

Placement File

Resume

Application

Teaching Certificate

Background Checks

St. Labre is an Equal Opportunity Employer and does not discriminate in hiring on the basis of race, color, national origin, citizenship status, ancestry, age, physical or mental disability, marital status, gender, religion, creed, veteran status, political affiliation, or any other factor protected by law, except where preferences for Roman Catholics and Native Americans are allowed by law.

Please complete all information. Incomplete applications will not be considered.

EDUCATION

Please list all education beginning with most recent.

Type of School	Name of School	Location (Complete Address)	Circle Last Grade/Year Completed	Major & Degree
High School			10 11 12	
College			1 2 3 4	
College			1 2 3 4	
Business or Trade School			1 2 3 4	
Business or Trade School			1 2 3 4	

List any specialized skills, experience, or training: _____

Licenses/Certificates (i.e. Drivers License, First Aid, etc.) _____

Exp. Date _____

BUSINESS REFERENCES

List four business or professional references who have known you for at least one year. Do not include relatives or former employers.

Name: _____	Name: _____
Address: _____	Address: _____
Phone #: _____	Phone #: _____
Name: _____	Name: _____
Address: _____	Address: _____
Phone #: _____	Phone #: _____

EMPLOYMENT HISTORY

Please fill this section out completely and do not write "see resume." Begin with your most recent employment. You may attach additional sheets if necessary. Applicants for teaching positions must also complete the Teacher Supplement. May we contact your current employer? _____ Yes _____ No

Company Address Telephone

Name and Title of Immediate Supervisor Final Salary

Date Started Date Left Reason for Leaving

Job Title and Primary Duties

Company Address Telephone

Name and Title of Immediate Supervisor Final Salary

Date Started Date Left Reason for Leaving

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Company Address Telephone

Name and Title of Immediate Supervisor Final Salary

Date Started Date Left Reason for Leaving

Job Title and Primary Duties

Company Address Telephone

Name and Title of Immediate Supervisor Final Salary

Date Started Date Left Reason for Leaving

Job Title and Primary Duties

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure employment with St. Labre Indian Catholic School, Pretty Eagle Catholic School, and/or St. Charles Mission School is true, complete and correct. If any information provided by me is found to be false, incomplete or misrepresented in any respect, it will be sufficient cause to cancel further consideration of this application, or immediately discharge me from the school's service, whenever it is discovered.

I expressly authorize St. Labre Indian Catholic School and its agents, without reservation, to contact and obtain information from all reference employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information regarding me in this application, resume or job interview. I hereby authorize the investigation of my past and present work, character, education, military and police records to ascertain any and all information which may be pertinent to my employment qualifications. I hereby waive any and all rights and claims I may have regarding St. Labre or its agents for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I certify that I have never been convicted of a felony classified as an offense against the person or family; or a felony classified as public indecency; or a felony classified as the possession or distribution of any substance classified as a controlled substance. I certify that I have never been convicted of a misdemeanor classified as an offense against a person or family or public indecency.

I understand that this application for employment is valid 45 days after the date of submission and that I must renew my application to be considered for vacancies arising after 45 days. Teaching applications will be on file for 1 year.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature

____/____/____
Date

Printed Name

TEACHER SUPPLEMENT

Complete pages 5, 6, and 7 if you are applying for a teaching position.

List contracted teaching experience with most recent experience first.

1. School _____ From _____ To _____
Address _____
Grade/Subject _____
Reason for Leaving _____
Name of Supervisor _____

2. School _____ From _____ To _____
Address _____
Grade/Subject _____
Reason for Leaving _____
Name of Supervisor _____

3. School _____ From _____ To _____
Address _____
Grade/Subject _____
Reason for Leaving _____
Name of Supervisor _____

4. School _____ From _____ To _____
Address _____
Grade/Subject _____
Reason for Leaving _____
Name of Supervisor _____

Have you ever been discharged or asked to resign from any position? _____

If so, please explain: _____

CERTIFICATION

St. Labre requires that all teaching, counseling and administrative applicants hold appropriate Montana certification. Obtaining and maintaining certification is the responsibility of the applicant. Montana state law requires certification within 60 days of the beginning of the school year. Inquiries regarding certification should be addressed to: Office of Public Instruction, State Capitol, Helena, Montana 59620. (406) 444-3150.

Montana accepts scores from the following professional examinations for certification: PPST, CBT, NTE, and CBEST. If you do not currently hold Montana certification, scores from one of these examinations will be required.

Do you hold Montana certification in the area for which you are applying? _____

Do you hold Montana certification in any other areas? _____ Which? _____

Do you hold certification in another state? _____

In which areas? _____

STUDENT TEACHING

School: _____ Grade/Subject: _____

Address: _____ Phone: _____ Date: _____

Supervising Teacher (s): _____

MISCELLANEOUS

1. When will you be available? _____

2. List any skills or interests that would supplement your educational background (music, athletics, etc.)

3. A placement file and copies of all transcripts must be on file before your application will be considered.

WRITING SAMPLES

1. Explain your interest in working at St. Labre, Pretty Eagle, or St. Charles, all Roman Catholic schools serving Native Americans in Eastern Montana.

2. Discuss those professional and personal strengths you could bring to a teaching position at St. Labre, Pretty Eagle, or St. Charles.

