

**KILA SCHOOL DISTRICT #20**  
**Classified Employment Application**



Application Packets must include:

1. Application (this document)
2. Cover Letter
3. Resume

*Complete application packets can be emailed to [lenglish@kilaschool.com](mailto:lenglish@kilaschool.com) or brought into the main office.*

**PLEASE TYPE OR PRINT CLEARLY (using a pen)**

**Today's Date:** \_\_\_\_\_

**Date Available for Work:** \_\_\_\_\_

**Position applying for:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Previous Name(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip Code:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_

**Cell Phone #:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Please circle your answers to the following questions and expand, if necessary:**

1. Policy 5122 requires all employment applicants to provide a background check. Are you willing to submit a background check? **Yes No**

2. 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 reason for discharge or resignation).

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I hereby certify that (check the applicable box and provide the information requested). *Please note that answers to this question may not necessarily disqualify an applicant from consideration for employment.*

- ☐ I have not plead guilty to, nor have I been convicted of any violation of criminal law (minor traffic offenses excepted).
- ☐ I have plead guilty to or I have been convicted of at least one violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere/no contest (minor traffic offenses excepted). \*Please attach and sign a complete description of the circumstances surrounding all convictions.

## Employment Record

List employment, with your most recent employment first. Describe your employment history, accounting for the last five positions held. You may include volunteer and paid experiences. Do not write "see resume". You may attach additional information.

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_ Phone #: \_\_\_\_\_

# of Years Employed: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Highest Salary: \$ \_\_\_\_\_

Reason for leaving:

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

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_ Phone #: \_\_\_\_\_

# of Years Employed: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Highest Salary: \$ \_\_\_\_\_

Reason for leaving:

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



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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_ Phone #: \_\_\_\_\_

# of Years Employed: \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

Highest Salary: \$ \_\_\_\_\_

Reason for leaving:

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## References

Please list current information for three professional references below. Do not write “see resume”. You may attach additional information.

| Name | Title | Relationship | Email Address | Phone Number |
|------|-------|--------------|---------------|--------------|
|      |       |              |               |              |
|      |       |              |               |              |
|      |       |              |               |              |

## Educational History

List educational institutions in order of attendance (most recent first). Do not write “see resume”. You may attach additional information.

| Institution | Location | Degree Earned | Years Attended |
|-------------|----------|---------------|----------------|
|             |          |               |                |
|             |          |               |                |
|             |          |               |                |

## Equal Opportunity Employer

Kila School District prohibits discrimination against or harassment of any person employed by or seeking employment with Kila School District because of race, religion, color, sex, national origin or because of age, physical or mental disability, or genetic information, when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or gender distinction. People with disabilities may request reasonable accommodation in the hiring process by contacting Kila School District's personnel office.

## Drug Free/Tobacco Free/Nicotine Free Policies

Kila School District is a drug free, tobacco free, and nicotine free school and, as such, requires all employees to adhere to specific drug free, tobacco free, and nicotine free policies.

**I certify that all statements and information provided within this application and its attachments, if any, are true and complete. I understand and agree, by signing below, that omission or misrepresentation of a material fact, or altering this application form, may result in refusal of my application by Kila School District, nullification of a possible offer of employment or termination from employment should Kila School District make an offer of employment to me and later discover any such omission or misrepresentation.**

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Applicant Signature

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Date

**\*All applications must be signed**

## Notice and Acknowledgement of Process

Pursuant to Montana's open meeting laws, application materials will likely be reviewed and considered by the Board of Trustees in open session. There are certain recognizable circumstances where individual rights of privacy clearly exceed the merits of public disclosure, thereby allowing the chairperson of the Board of Trustees of a public school to convene in a closed (executive) session should the chairperson make a determination that an individual's right of privacy clearly outweighs the public's right to know. If the chairperson of the Board of Trustees convenes in an executive session to review or consider any information obtained during the hiring process, I acknowledge and agree that the Board may engage in discussion about me without my physical presence. I understand that once my application materials are given to the Board of Trustees, my name may be disclosed to the public upon request. If I am selected as a finalist, my name and other information about my background and qualifications will be disclosed to the public through a press release.

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Applicant Signature

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Date

**\*All applications must be signed**

