



# Rock Creek Grant School



P.O. Box 127 ■ Bullhead, SD 57621 ■ (Office) 605-823-4971 ■ (Fax) 605-8234350

## Application for Employment

In compliance with Federal and Tribal Equal Opportunity laws, qualified applicants are considered for all positions without regard to race, religion, sex, national origin, marital status, or the presence of non-job-related medical conditions or handicap, Indian preference in employment is considered by the Rock Creek Grant School Board.

### Personal History:

Position Applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

Address: \_\_\_\_\_ Apt/Suite \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (work) \_\_\_\_\_

Are you known by another name to school and references? Yes \_\_\_\_\_ No: \_\_\_\_\_

If Yes, by what name? \_\_\_\_\_

Were you previously employed at the Rock Creek Grant School? Yes \_\_\_\_\_ No: \_\_\_\_\_

If yes, list the dates of employment and positions held:

\_\_\_\_\_

\_\_\_\_\_

Are you available full-time? Yes \_\_\_\_\_ No: \_\_\_\_\_

If employed, when will you be available to work? \_\_\_\_\_

Are you claiming Indian Preference? Yes \_\_\_\_\_ No: \_\_\_\_\_ (If Yes Please submit documentation)

\_\_\_\_\_

In the past five years, have you been arrested or convicted of a drug felony, a crime involving a child, crimes of violence, sexual assault, molestation, exploitation, contact or prostitution, or crimes against persons? Yes \_\_\_\_\_ No: \_\_\_\_\_

If "Yes," explain the final disposition of the charge: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Education Information:

Attention: To complete the application, transcripts must accompany the application form.

High School Attended: \_\_\_\_\_

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

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

Did you graduate? Yes \_\_\_\_\_ No: \_\_\_\_\_ GED (year) \_\_\_\_\_

College or University: \_\_\_\_\_

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

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

Years Attended? From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? Yes \_\_\_\_\_ No: \_\_\_\_\_ Degree: \_\_\_\_\_

Technical/Vocational School: \_\_\_\_\_

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

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

Years Attended? From: \_\_\_\_\_ To: \_\_\_\_\_

Did you graduate? Yes \_\_\_\_\_ No: \_\_\_\_\_ Degree: \_\_\_\_\_

## Employment Information

Please complete the following employment history for each job that you have held in the past five (5) years. It is very important that you furnish information in order for the Rock Creek Grant School to properly assess your job experience. Attach additional sheets if needed.

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

Duties & Responsibilities: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

Duties & Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

Duties & Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_

Start Date: \_\_\_\_\_ End Date: \_\_\_\_\_ Reason for leaving? \_\_\_\_\_

Duties & Responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been terminated or dismissed from a contracted position? Yes \_\_\_\_\_ No: \_\_\_\_\_

If Yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

Have you ever left a contracted position before the term of the contract was over? Yes \_\_\_\_\_ No: \_\_\_\_\_

If Yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

**References**

Please include, with your application, three (3) Letters of Reference. In addition, please list 3 references, below:

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

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

Telephone: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

**Agreement**

I certify the answers given herein are true and complete to the best of my knowledge and hereby authorize designated Rock Creek Grant School staff to conduct follow-up consultation regarding my previous employment and other information as may be necessary to arrive at an employment decision.

I understand that applicants selected for employment must successfully complete a Federal, State and Tribal Background Check and submit to pre-employment Drug/Alcohol Testing. I further understand that unsuccessful completion may be ground for non-selection or dismissal.

I hereby release the Rock Creek Grant and their designated staff from all liability from other employer's or individual responses to inquires in connection with the application for employment.

In the event of employment, I understand the false or misleading information given in my application or interview(s) may result in discharge.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

A completed application includes the following documents:

- 1) Signed Application for Employment (this document)
- 2) Transcripts
- 3) Letters of Reference
- 4) Degree of Indian Blood Certificate (if requesting Indian Preference)

Mail to: Rock Creek Grant School, P.O. Box 127, Bullhead, SD 57621