

Superior School Substitute Application

Thank you for your interest in becoming a volunteer at Superior School District # 3. All applicants interested in working for us in this capacity will have the application information reviewed carefully, as well as having a background check conducted through the State Department of Justice. Those who have substituted for a year or more will not have to resubmit an application, but need to be sure **and verify with the high school office each year they are interested in continuing to serve in this capacity.**

Superior School District #3
P.O. Box 400
Superior, MT 59872

APPLICATION OF:

Mr./Mrs./Ms. _____

Last

First

Middle Initial

Maiden Name

Date of Birth: _____ Social Security Number: _____

Physical

Address: _____

Street

City

State

Zip

Mailing

Address: _____

Street /P.O. Box

City

State

Zip

Telephone#: _____

(Home)

(Cell)

(Work)

Email Address: _____

Social Security Number: _____

CERTIFICATION

Do you hold a valid Montana Teaching Certificate? YES NO

If yes, Expiration Date: _____

Folio Number: _____ Class: _____ Level of Certification _____

Areas of Expertise: _____

COMPLETED EDUCATION:

(College/University)

(Highest Degree)

(Location)

(Date Graduated)

(College/University)

(Highest Degree)

(High School)

(Location)

(Date Graduated)

I am interested in being a **Volunteer**. Area(s) in which I am interested in volunteering are:

PK-K _____ Elementary Library _____

1-3 _____ High School Library _____

4-6 _____ Junior High School _____

Senior High School _____

Indicate the area (s) in which you are interested in **Substituting**:

K-6 _____ Custodian _____ Kitchen _____ Aide _____ Office _____

7-8 _____ 9-12 _____

Areas NOT interested in are: _____

Bus Driver Substitute

_____ Have a current CDL

_____ Hold a MT DL

_____ Have a current D.O.T. Physical

_____ Have a current First Aid/ CPR card

Please list any special skills or interests that you would bring to the job:

SINCE YOU ARE REQUESTING A VOLUNTEER POSITION THAT INVOLVES WORKING WITH CHILDREN, PLEASE COMPLETE THE FOLLOWING SECTION:

Have you ever been convicted of any crime, or are you currently under indictment for any crime: Yes No

If you circled "yes", please include the dates, location/jurisdiction, circumstances and the outcome of the conviction.

I hereby certify that the statements made by me in this application and all related information that I have provided are true, accurate and complete to the best of my knowledge. I understand that omission or misrepresentation of material fact may result in refusal of, or separation from employment. ALL applicants must contact High School Secretary, to finish pre-employment/background check paperwork. You may call 406-822-4851 ext. 110 to set up an appointment.

Signature of applicant : _____ Date signed _____

Pursuant to the Superior School Board policy 5122, I expressly authorize the release to the Educational Agency receiving this application, any records or information which may refer or relate to this application for employment/volunteering including, but not limited to, records of educational institutions, law enforcement or criminal justice agencies, agencies maintaining child abuse records and previous employers. I hereby release and discharge the educational agency receiving this application and any responsible person(s) employed by the agency from any and all claims and liability, which I may have or ever claim to have, relating to information provide to the educational agency as part of this application for employment/volunteering.

Please initial one of the following:

YES _____

NO _____

Are you a veteran: Yes No

Dates of service: _____

May we contact your references for recommendation? Yes No

If no, please explain:

REFERENCES: Please list reference persons who are qualified to attest to your fitness as a volunteer, including persons for whom you have worked or who know your abilities and character.

DO NOT WRITE "REFER TO MY RESUME"

Name _____

Title _____

Address _____

Best Phone # _____

Name _____

Title _____

Address _____

Best Phone # _____

Name _____

Title _____

Address _____

Best Phone # _____

Name _____

Title _____

Address _____

Best Phone # _____

Equal Opportunity Employer

Superior School District #3 prohibits discrimination against harassment of any person employed by or seeking employment with the school district because of race, creed, religion, color, political affiliation or national origin or because of age, physical or mental disability, of marital status, or gender when the reasonable demands of the position do not require an age, physical or mental disability, marital status, or gender distinction. People of disability may request reasonable accommodation in the hiring process by contacting the school district personnel office.

Proof of Employability, TB Test

Any Applicant chosen for employment must be able to produce a social security card, driver's license, or some other acceptable form of verification of employment eligibility in the United States, pursuant to Form I-9 of the U.S. Department of Justice.

Similarly, a selected applicant must provide verification of having received a tuberculin (TB) test within the past year. Verification must include the date of the test, the results of the test, and the signature of the person who conducted the test. It is policy to require verification of a TB test from any candidate chosen for employment along with documentation of the results of the tuberculin (TB) test within seven (7) days of employment.

Authorization to release Employment Records

If employed by Superior School District #3, the applicant authorizes the school district to supply his/her employment record at the school district's sole discretion, in whole or part, to any prospective employer, government agency, or other party, when the school district's interest is deemed appropriate.

Drug Free/Tobacco Free Policies

The schools within Superior School District# 3 are drug free, tobacco free schools, and, as such, require all employees to adhere to specific drug free, tobacco free policies.

AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I, _____, am seeking employment with the Superior School District #3. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of the children of the Superior School District #3. I hereby expressly and voluntarily give the Superior School District #3 the right to make a thorough investigation of my past employment, education & activities. I specifically authorize the release of any and all information of a confidential or privileged nature, including confidential criminal justice information as defined in Section 44-5-103(3), MCA, to the staff of the Superior School District #3 and its agents. I understand that the Superior School district #3 reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release the Superior School District #3 and any organizations, company institutions or person furnishing information to the District and its agents as expressly authorized above, from any dissemination of the information requested, subject to the provisions of Title 44, Chapter 5, Part 3, MCA.

This document is effective for 30 days or revoked, in writing, by me.

Signature _____ Date _____

Print Full Name _____

Print Full Address _____

Date of Birth _____ Social Security # _____

State of _____

County of: _____

On this _____ day of _____, 20____, before me, a notary public for the state of _____, personally appeared _____, known to me to be the person named in the foregoing release, and acknowledged that he/she executed the same as his/her free act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year in this certificate first above written.

Notary of the State of _____

County of _____

My commission expires on _____

**SUPERIOR SCHOOL DISTRICT #3
PERSONNEL**

5122F

**APPLICATION AND NOTICE PURSUANT TO THE NATIONAL CHILD PROTECTION ACT OF 1993
AS AMENDED BY THE VOLUNTEERS FOR CHILDREN ACT**

(This document consists of two pages)

To _____:

You have applied for employment with, will be working in a volunteer position with, or will be providing vendor or contractor services to (write in Agency or Entity name) _____ for the position of (please be specific) _____.

The National Child Protection Act of 1993 (NCPA), Public Law (Pub. L.) 103-209, as amended by the Volunteers for Children Act (VCA), Pub. L. 105-251 (Sections 221 and 222 of Crime Identification Technology Act of 1998), codified at 42 United States Code (U.S.C.) Sections 5119a and 5119c, authorizes a state and national criminal history background check to determine the fitness of an employee, or volunteer, or a person with unsupervised access to children, the elderly, or individuals with disabilities.

Pursuant to the VCA, the entity (a) to which you have applied for employment or to serve as a volunteer, (b) by which you are employed or serve as a volunteer, or (c) which requests a background check. Your rights and responsibilities under the VCA are as follows:

1. Provide a set of fingerprints. These fingerprints will be used to conduct a search of FBI criminal history records. The entity conducting this background check may use the resulting record only for the authorized purpose(s) and will not retain or disseminate it in violation of federal statute, regulation, or executive order, or rule, procedure, or standard established by the National Crime Prevention and Privacy Compact Council. 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).
2. Provide your name, address, and date of birth, as appears on a document made or issued by or under the authority of the United States Government, a State, political subdivision of a State, a foreign government, a political subdivision of a foreign government, an international governmental or an international quasi-governmental organization which, when completed with information concerning a particular individual, is of a type intended or commonly accepted for the purpose of identification of individuals. 18 U.S.C. §1028(D)(2).
3. Provide a certification that you (a) have not been convicted of a crime, (b) are not under indictment for a crime, or (c) have been convicted of a crime. If you are under indictment or have been convicted of a crime, you must describe the crime and the particulars of the conviction, if any.
4. You are entitled to (a) obtain a copy of the background check report and (b) challenge the accuracy and completeness of any information contained in any such report and obtain a prompt determination as to the validity of such challenge before a final determination is made by the state government agency performing the background check. If agency policy permits, its officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If the entity policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks> or by

In accordance with federal law regarding notices and disclosures, MT Dept of Justice requires the entity to which you are applying to work or volunteer to use this form.

Form number: DOJ-NCPA/VCA20120611



**SUPERIOR SCHOOL DISTRICT #3
PERSONNEL**

5122F

contacting Montana Criminal Records and Identification Services at PO Box 201403, Helena MT 59620. 28 CFR, 16.30 through 16.34.

5. Prior to the completion of the background check, the entity may choose to deny you unsupervised access to a person to whom the entity provides care.

The entity shall access and review State and Federal criminal history records and shall make reasonable efforts to make a determination whether you have been convicted of, or are under pending indictment for, a crime that bears upon your fitness and shall convey that determination to the qualified entity. The entity shall make reasonable efforts to respond to the inquiry within 15 business days.

Your Name: _____
 First Middle Maiden Last

Date of Birth: _____

Address: _____
 Street Apt.

City State Zip

I have been convicted of, or am under pending indictment for, the following crimes [include the dates, location/jurisdiction, circumstances and outcome]:

I have not been convicted of, nor am I under pending indictment for, any crimes.

Your signature below acknowledges this entity has informed you of your privacy rights for fingerprint-based background check requests used by the entity for non-criminal justice purposes.

I have been provided with a copy of this form. I have read and understood the foregoing and my certification is true and correct to the best of my knowledge and belief.

Date

Signature of Applicant



In accordance with federal law regarding notices and disclosures, MT Dept of Justice requires the entity to which you are applying to work or volunteer to use this form.

NONCRIMINAL JUSTICE APPLICANT'S RIGHTS

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification⁸ by The Center for Children and Families that your fingerprints will be used to check the criminal history records of the FBI.
- If you have a criminal history record, the officials making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the job, license, or other benefit based on information in the criminal history record.⁹

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.¹⁰

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <http://www.fbi.gov/about-us/cjis/background-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI at the same address as provided above. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)

If a change, correction, or update needs to be made to a Montana criminal history record, or if you need additional information or assistance, please contact Montana Criminal Records and Identification Services at dojitsdpublicrecords@mt.gov or 406-444-3625.

Your signature below acknowledges this agency has informed you of your privacy rights for fingerprint-based background check requests used by the agency for non-criminal justice purposes.

I do do not want a copy of the Privacy Act Statement.

Signed:

Name

Date

⁸ Written notification includes electronic notification, but excludes oral notification.

⁹ See 28 CFR 50.12(b).

¹⁰ See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d) and 906.2(d).



In accordance with federal law regarding notices and disclosures, MT Dept of Justice requires the entity to which you are applying to work or volunteer to use this form.

Form number: APPR&R 20120611

AGENCY PRIVACY REQUIREMENTS FOR NONCRIMINAL JUSTICE APPLICANTS

Authorized governmental and non-governmental agencies/officials that conduct a national fingerprint-based criminal history record check on an applicant for a noncriminal justice purpose (such as a job or license, immigration or naturalization matter, security clearance, or adoption) are obligated to ensure the applicant is provided certain notice and other information and that the results of the check are handled in a manner that protects the applicant's privacy.

- Officials must provide to the applicant written notice¹ that his/her fingerprints will be used to check the criminal history records of the FBI.
- Officials using the FBI criminal history record (if one exists) to make a determination of the applicant's suitability for the job, license, or other benefit must provide the applicant the opportunity to complete or challenge the accuracy of the information in the record.
- Officials must advise the applicant that procedures for obtaining a change, correction, or updating of an FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR) Section 16.34.
- Officials should not deny the job, license, or other benefit based on information in the criminal history record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
- Officials must use the criminal history record solely for the purpose requested and cannot disseminate the record outside the receiving department, related agency, or other authorized entity.²

The FBI has no objection to officials providing a copy of the applicant's FBI criminal history record to the applicant for review and possible challenge when the record was obtained based on positive fingerprint identification. If agency policy permits, this courtesy will save the applicant the time and additional FBI fee to obtain his/her record directly from the FBI by following the procedures found at 28 CFR 16.30 through 16.34. It will also allow the officials to make a more timely determination of the applicant's suitability.

Each agency should establish and document the process/procedures it utilizes for how/when it gives the applicant notice, what constitutes "a reasonable time" for the applicant to correct or complete the record, and any applicant appeal process that is afforded the applicant. Such documentation will assist State and/or FBI auditors during periodic compliance reviews on use of criminal history records for noncriminal justice purposes.

¹ Written notification includes electronic notification, but excludes oral notification.

² See 5 U.S.C. 552a(b); 28 U.S.C. 534(b); 42 U.S.C. 14616, Article IV(c); 28 CFR 20.21(c), 20.33(d), 50.12(b) and 906.2(d).