

## BIRCH GROVE COMMUNITY SCHOOL

"Where Roots Grow Deep and Branches Reach High!"

## APPLICATION OF EMPLOYMENT

As a public charter school, Birch Grove Community School encourages innovation related to delivery of programs and management of schools, and requires a high level of accountability for student achievement. It is tuition free and funded on a per pupil basis with state education dollars. It is open to all students and has no admissions test or any other requirement for enrollment.

Each applicant for a position at Birch Grove Community School (BGCS) or Birch Grove Community Service will complete this form. If the applicant is elected and accepts a position at BGCS, the information given herein becomes a part of the employee's professional record. Therefore, be sure that all information is accurate, complete and legible. The amount of space provided for answering some items is necessarily and purposely limited. We suggest you word the answers to these items carefully.

Position Applying For:									
PERSONAL INFORMATION									
First name	Middle name			Last name					
Current address:									
Street and Apt #	City	State	Zip Code	Phone number					
Permanent address (if	different from	above):							
Street and Apt #	City	State	Zip Code	Phone number					
Are you a United States	citizen or otherv	wise authorize	ed to work in the	U.S. on an unrestricted basis?	Yes	No			
Have you ever been con If yes, please explain: _			No						
Date available:			Do you pref	er: full-time part-time?					
At the time of making ap	pplication, are ye	ou under cont	ract for a school t	erm? Yes No					
If so, when does this con	ntract expire?								
EMPLOYMENT HIST									
Employer:			cent employer Address:						
Your position:			Salary:						
Duties:									
Dates of employment: _			_to						
Supervisor:	Name		Title	May we contact	et? Yes	No			

Reasons for leaving:				
Prior Employer				
Employer:	Address:			
Your position:	_ Salary:			
Duties:				
Dates of employment: to				
Supervisor:Name		May we contact?	Yes	No
	Title			
Reasons for leaving:				
Prior Employer				
Employer:	Address:			
Your position:	_ Salary:			
Duties:				
Dates of employment:to				
Supervisor:	Ti'd	_ May we contact?	Yes	No
Name	Title			
Reasons for leaving:				
EDUCATION				
EDUCATION				
High School				
Name and address				
Did you graduate? Yes No Attended from	to			
If you did not graduate, did you get your GED? Yes				
Special honors or awards:				
Technical or Vocational School				
Name and address				
Did you graduate? Yes No Attended from				
Degree or certification: Specialty:				
Special honors or awards:				
College or University				

Name and address	
Did you graduate? Yes No Attended	from to
Degree or certification:	Specialty:
Special honors or awards:	
ADDITIONAL QUESTIONS	
How did you hear about this job?	
Please describe any experiences you feel ha	ave significantly contributed to your abilities for the position you are seekin
your abilities for the position you are seeki	r, environmental education/training, etc.) which you feel may contribute to ng:
knowledge. If I am employed, I understar	ertions set forth in this application are true and complete to the best of my and that any false statements on this application shall be considered y authorize Birch Grove Community School/Community Service to tion and employment history.
Signature:	Date

## TENNESSEN WARNING

In accordance with the Minnesota Government Data Practices Act, Birch Grove Community School (BGCS) #4145 is required to inform you of your rights as they pertain to the private information collected from you, but not to the public. The personal information is considered private and not available to the general public.

The information collected from you or from other agencies or individual authorized by you is used to determine your qualifications for Birch Grove Community School.

You are not required to provide this information however, it is necessary to determine if you qualify for employment. Disclosure of your Social Security number is voluntary, unless you are employed. If employed, you must disclose it in order to be in compliance with state and federal tax withholding laws. If you do not supply the required information, BGCS, will not be able to consider your employment. The use of the provided data we collect is limited to that necessary for the administration and management of the school district employment process. Persons or agencies with whom this information may be shared include:

- 1. Human Resource Department personnel
- 2. School District Administration
- 3. Managers and Supervisors in department of job opening

Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information as private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

- 1. The right to see or obtain copies of the data maintained on you.
- 2. The right to be told of the contents and meaning of the data.
- 3. The right to contest the accuracy and completeness of the data.

To exercise these rights, contact the Birch Grove Community School office.

I have read and understand the above information regarding my right Act.	nts under the Minnesota Government Data Practices
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Signature	Date & Print Name

<u>Your application</u>. We sincerely appreciate your interest in Birch Grove Community School/Community Service and the time you have taken to complete this application. We will reciprocate by giving your application serious and prompt consideration. In order for your application to be complete, you must furnish us with the following items to BGCS, PO Box 2383, Tofte MN 55615 or email to <a href="mailto:birchgrove@boreal.org">birchgrove@boreal.org</a>

- 1. This completed application
- 2. A Letter of Interest
- 3. A complete transcript or training/education/certification list
- 4. A resume, if you desire

If you have other questions concerning employment at Birch Grove Community School, or the community itself, we will try to answer them for you. Due to the large number of applicants and budget considerations, we do not notify applicants who submit incomplete applications.

<u>Certification.</u> The individual teacher assumes the responsibility for obtaining and renewing teaching licenses. You must register your teaching license in the office at the time you are being appointed to a position. Information on the requirements for certification and application forms may be obtained from the Director of Certification, Minnesota Department of Education, 1500 Highway 36 West, St. Paul, MN 55113-4226.

Non-Discrimination Notification Policy. It is the policy of Birch Grove Community School not to discriminate on the basis of sex, marital status, age, race, color, national origin, economic status, sexual orientation, physical disability or religion in our educational programs, activities, or employment. Inquiries may be directed to: BGCS, P.O. 2383, Tofte, MN 55615, phone number (218) 663-0170 or to the Director of the Office for Civil Rights, Dept. of Health, Education & Welfare, Washington, DC.