

Pine Creek/Arrowhead /Cooke City

SUBSTITUTE TEACHING APPLICATION PACKET

COOKE CITY DISTRICT
PINE CREEK SCHOOL DISTRICT #19
ARROWHEAD SCHOOL DISTRICT

Dear Applicant:

Thank you for applying to be a Substitute Teacher. A valid application for this position requires the documents listed below:

- Completed Substitute Teaching Application (both pages)
- Applicant Rights and Consent to Fingerprint
- Fingerprint card from police/sheriff
- Copy of current Driver's License
- Copy of Social Security Card
- Copy of MT Educator's License (if you have one)
- Certificate of completion from the free, self-paced Learning Hub Course (If you have completed it)

PLEASE DELIVER:

cosup@parkcounty.org

Lisa Rosberg

Park County Superintendent of Schools

414 E Callender Street

Livingston, MT 59047

Potential Substitute Teachers or School Volunteers

Please call the Livingston Police Station 406-222-2050 to arrange a date to have fingerprints taken or take chance of getting fingerprints on a Tuesday and Thursday afternoon at 414 E. Callender Street, Livingston, MT – (these are the only days fingerprints are done).

Then drop off the fingerprint card for me to process. Substitutes or volunteers should include a note so I will know if it is for volunteering or substitute teaching or both.

You can call me on my cell if you want to make an appointment, but dropping it off seems easier to most applicants.

If I am not in the office, the card can be dropped off at the Health Department for me to pick up.

Thank you for offering to be a substitute teacher, an emergency substitute teacher, or a school volunteer. We appreciate your commitment to education.



Superintendent
of Schools

Lisa Rosberg

414 East Callender St.
Livingston, MT 59047 o:
406.222.4148
c: 406.823.0115
e: cosupt@parkcounty.org
www.parkcounty.org

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any systems(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

Applicant Rights and Consent to Fingerprint

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 employment or a 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 **Park County Superintendent of Schools** that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for employment, 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 employment, 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.

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.

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).

NCPA/VCA Applicants

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.

1. 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).
2. 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.
3. 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: _____

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

☐

I authorize Montana Department of Justice, Criminal Records and Identification Services Section to disseminate criminal history record information to **Park County Superintendent of Schools**.

Signature of Applicant

Date

PLEASE PRINT

Date _____

COOKE CITY, PINE CREEK SCHOOL and ARROWHEAD SCHOOL
SUBSTITUTE TEACHING APPLICATION FORM

This form is intended for those interested in being on the substitute list. Pine Creek and Arrowhead Schools adheres to the principles of Equal Employment Opportunity and Affirmative Action in personnel practices which prohibit discrimination against applications with respect to race, age, religion, sex, color, handicap, or national origin.

Name _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone Number _____ Social Security Number _____

Days I cannot substitute _____

Type of Substituting Desired:

☐ Will sub for any subject and/or grade level

☐ Elementary (Kindergarten – Grade 5)

☐ Middle School (Grades 6, 7, & 8)

☐ Special Education

☐ Music/Physical Education

☐ Teacher's Aide/Para-educator

Certificate Information

What state is certificate held: _____ SEID: _____

Class: _____ Endorsement: _____

Issue Date: _____ Expiration Date: _____

Educational Training

College/University	Dates	Degree

Teaching Experience

School	Dates	Grade Level

Have you been previously employed by Cooke City School? ☐ YES ☐ NO If yes, when? _____

Have you been previously employed by Pine Creek School? ☐ YES ☐ NO If yes, when? _____

Have you been previously employed by Arrowhead School ☐ YES ☐ NO If yes, when? _____

Are you legally eligible for employment in the U.S.? ☐ YES ☐ NO

Are you able with or without reasonable accommodation to perform the functions of the job for which you are applying? ☐ YES ☐ NO

Have you ever been released or discharged from employment or resigned to avoid such release or discharge? ☐ YES ☐ NO

If yes, please explain. Include date of discharge or resignation and reason for discharge or resignation:

I hereby certify that (check the applicable box and provide the information requested):

☐ I have not pleaded guilty to or have been convicted of any violation of criminal law, including criminal convictions resulting from a deferred sentence or a plea of nolo contendere/no contest (minor traffic offenses expected)

☐ I have pleaded guilty to or have been convicted of at least one violation of criminal law. Please attach and sign a complete description of the circumstances surrounding such conviction. (This may not necessarily disqualify a person from consideration for employment)

Applicant's Signature _____ Date _____

Please send or bring in your complete Substitute Teaching Application to:

Lisa Rosberg

~~Monie Waitt~~

County Superintendent of Schools

414 E. Callender Street

Livingston, MT 59047

Fingerprint Redissemination Request

Lisa Rosberg Park County Superintendent of Schools	City County Complex 414 E Callendar Street Livingston, MT 59047	Phone: 406.222-4148 Email: cosupt@parkcounty.org
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Admin. R. Mont. 10.57.201A requires all applicants for initial licensure or reinstatement of former licensure complete a fingerprint based background check.

If your fingerprint result s on file with the Office of Public Instruction, a Montana public school or County Superintendent, or a unit of the Montana university system, those results can be distributed from one public education entity to another, as long as the result is less than 2 years old.

It is against FBI policy for results to be shared across state lines or from private institutions (colleges and universities, or private schools).

Applicant Information:

Last Name:	First Name:	Middle Initial:
Folio ID (assigned by OPI):	Former name(s) (Maiden or Other)	
Date of Birth:	Last four digits of SSN:	

I authorize:	<input type="checkbox"/> The Office of Public Instruction	
	<input type="checkbox"/> a Unit of the Montana University system; or	Select a university:
	<input type="checkbox"/> Montana Public School or County Superintendent	Enter name of School or County:

to share the results of my fingerprint based background check with:

	<input type="checkbox"/> The Office of Public Instruction	
	<input type="checkbox"/> a Unit of the Montana University system; or	Select a university:
	<input type="checkbox"/> Montana Public School or County Superintendent	Enter name of School or County:

If you are requesting the Park County Superintendent of Schools to distribute your fingerprint results to a Montana university, or Montana public school or county superintendent, please provide the specific person you wish to receive the background check results:

Recipient Name: Lisa Rosberg, Park County Superintendent of Schools		Address: 414 E Callender	
City: Livingston:	State MT	Zip Code: 59047	Phone: 1.406.222.4148
Signature of Applicant:	Printed or Typed Name of Applicant:		Date:

SUBSTITUTE TEACHER

REPORTS TO: Principal or Lead Teacher

ESSENTIAL FUNCTIONS:

Instructs classes in the absence of the regular teacher.

Assumes all other duties and responsibilities for a teacher during the time the teacher is absent. Prepares lesson plans if instructed to do so by the building principal.

Maintains order in the classroom.

Maintains records, including but not limited to recording student grades, student assignments, projects, and other clerical work as instructed by the absent teacher.

Supervises students and aides.

Only minimum duties are listed. Other functions may be required as given or assigned.

DESIRED MINIMUM QUALIFICATIONS:

High school diploma or equivalent and/or valid Montana Teaching Certificate with proper endorsement or eligibility for certification.

Ability to follow both oral and written directions and instructions.

Ability to effectively present information and respond to questions from students, parents, staff. Ability to handle stressful situations.

Ability to maintain confidentiality of student matters. Ability to effectively manage time and responsibilities.

EQUIPMENT USED:

Computer (IBM & Mac), calculator, copier, fax machine, telephone/voice mail, email, website, overhead projector, two-way radio system

WORK ENVIRONMENT:

While performing the duties of this job, the employee regularly works inside. The employee is directly responsible for the safety, well-being, and work output of students. The noise level in the work environment is usually moderate, depending on the nature of the assigned course.

PHYSICAL DEMANDS:

While performing the duties of this job, the employee is frequently required to sit; occasionally walk and stand. Specific vision abilities required by this job include close vision, distance vision, depth perception, and the ability to adjust focus. The employee is required to be able to hear conversations in quiet environments.

MENTAL/MOTOR DEMANDS:

While performing the duties of this job, the employee rarely performs routine work. The employee frequently exercises flexibility (ability to shift from one task to another). Guidance and reinforcement are infrequently available. The employee frequently works within time constraints and maintains attentiveness intensity. The employee is frequently involved in social interactions, which require oral and written communications.

The physical demands, work-environment characteristics, and mental/motor demands described within this job description are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

Step 1: Go To

<http://learninghub.mrooms.net/>



Teacher Learning Hub
Office of Public Instruction

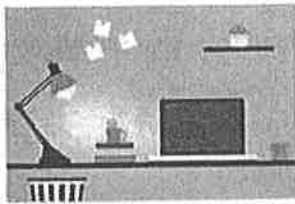
Step 2:

Log-In or Create a New Account

Step 3:

Click on the Self-Paced Course Icon

Self-Paced Courses



Step 4:

Scroll Down to Support Staff Section

- English Language Arts & Literacy
- Fine Arts
- Health Enhancement
- Indian Education for All
- Instructional Strategies
- Library Media
- Mathematics
- Mental Health & Behavior
- MTSS
- Science
- Social Studies
- Special Projects
- **Support Staff**

Click Here

Step 5:

Follow the directions as stated

>Welcome to Our School! An Introduction for Substitute/Guest Teachers

This course will address: professionalism, legal aspects, classroom management, and strategies to successfully serve as a substitute or guest teacher. This course is designed to meet the three-hour training requirement described in Administrative Rules of Montana 10.55.716.

- Self-paced
- 3 CPE renewal units
- To enroll, click on the course name then "Enroll me" button

Step 5: Enroll

Enroll me

* Complete the course and submit the certificate at the end to the County Superintendent

