CERTIFIED STAFF APPLICATION FORM

RED CLOUD INDIAN SCHOOL

100 Mission Drive; Pine Ridge, SD 57770

Human Resources Office

Superintendent's Office

PHONE: 605/867-5491 x 2213 FAX: 605/867-1291 EMAIL: lisaswallow@redcloudschool.org

PHONE: 605/867-5888 FAX: 605/867-9230 EMAIL: thamilton@redcloudschool.org

This application is submitted for the	ne position of	on of Date		
Name	Social Security Number			
Address				
Street	City/St	ate	Zip Code	
Email Address	Home Phone	Business I	Phone	
EDUCATIONAL RECORD	List name and location of ins	stitution, year(s) attended, degr	ee/major(s). List most recent firs	
NAME I	LOCATION	YEARS ATTENDED	DEGREE/MAJOR(S)	
)				
3				
Oo you hold a valid South Dakota	certificate? Num	ber	Expiration Date	
Do you hold a valid certificate in a	nother state? State	Name	Expiration Date	
ist Endorsements/Teaching Majo	r/Additional Subjects			
Based upon your certificate and s	ubject areas in which you are e	ndorsed, please indicate your le	evel of preferences:	
/lontessori/Kindergarten Elementary (1-8)	_			
Departmentalized Middle (6-8) High School (9-12)	Subject area(s): Subject area(s):			
PROFESSIONAL MEMBE	ERSHIPS AND RECENT	COMMUNITY ACTIVIT	ΓIES	

EMPLOYMENT HISTORY

List experience in chronological order starting with most current. Attach an additional sheet(s) if necessary.

Reason for Le	aving
	V
City/State	Zip Code
Title	
Date Separated	
Reason for Leaving	
City/State	Zip Code
Title	
Date Separated	
Reason for Leaving	
City/State	Zip Code
Title	
	City/State Title Date Separated Reason for Leaving City/State Title Pate Separated Reason for Leaving

REFERENCES

Please list the names of four persons who will serve as references and can be contacted. Include names, titles, current addresses and telephone numbers.

1			
Name	Title		
Address	City/State	Zip Code	
Home Phone	Work Phone or Email		
2Name	Title		_
Address	City/State	Zip Code	
Home Phone	Work Phone or Email		
3Name	Title		
Address	City/State	Zip Code	
Home Phone	Work Phone or Email		
4 Name	Title		
Address	City/State	Zip Code	
Home Phone	Work Phone or Email		

ESSAY

Incl	ude the following information in your essay:
1.	Describe your reasons for applying to teach at Red Cloud Indian School.
2.	Describe your educational goals, philosophy and teaching style.
3.	Red Cloud Indian School is an educational system rooted in the Catholic, Lakota, and Jesuit traditions. The mission of RCIS is to provide an education of the mind and the spirit, and to form "men and women for others." Describe how would you support and advance this "mission?"
4.	The educational context in which Red Cloud operates requires an understanding of the Pine Ridge Indian Reservation and the Lakota culture. Describe your current knowledge of the Pine Ridge Indian Reservation and the Lakota culture.
Plea	se attach additional sheets as necessary.
Plea	se sign (not type) your name here to give your confirmation to all the information you have entered on this application.

Date

Signature

LEGAL REQUIREMENTS

1.	Selective Service. SDCL 3-1-1.1 prohibits a school district from hiring anyone who is required to register for Selective Service and has not done so. Males born after December 31, 1959 are required to register for Selective Service.					
	Are you registered?	Yes	No			
	If you are registered,	, please provid	e your Selective Service	number:		
2.	Crimes Involving Moral Turpitude.					
	SDCL 13-42-10 provides for revocation or refusal of certificate on conviction of a crime. Have you been convicted of a felony or any other offense involving moral turpitude?* Yes No					ny
	If yes, please explain	n:				
	Will you agree, upon	request, to pro	oduce copies of any crim	inal records related to such	conviction?	
	Yes	No				
viol any If th	lation, and rehabilitation person being consider	on will be take ered for emplo	n into consideration. Pur yment by the School Dist	suant to South Dakota law, rict to the Division of Crimir	the offense, seriousness and the nature of the Superintendent may submit the name nal Investigation for a criminal record che notify the Superintendent of the criminal	of
con beli a p	nsideration for employ ief. I waive the right to	ment. I hereby hold liable pe d Indian Schoo	certify that the informati rsons whose names app I becomes effective or bi	on in this application is true ear on the application form.	grounds for dismissal or removal of e and correct to the best of my knowledge I also understand that before any contrac pproved and a valid South Dakota certifica	t fo
mai	intained by any state o	or federal gove		f verifying the answer subm	spect court and law enforcement records itted above and specifically waive any pri	vacy
pre	vious employers and p	professional re	ferences; and I agree to		nformation in writing or orally from my ol, Inc., and its employees, as well as my	
SIG	NATURE			DATE		