

**Nixyáawii Community School  
An Equal Opportunity Employer  
Classified Personnel Employment Application**

Nixyáawii Community School  
73300 July Grounds Lane  
Pendleton, OR 97801

**APPLICATION INFORMATION REQUESTED**

- A completed application form. Applications must be complete and will not be Accepted without a signature
- A current resume
- Letter of application preferred
- Current letters of recommendation
- Supplemental materials of your choice
- Finalists for employment will be contacted for a personal interview

Application materials are to be submitted to:

Ryan Heinrich, Principal  
Nixyáawii Community School  
ryan.heinrich@pendleton.k12.or.us

Your application is current for one year, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

Nixyáawii Community School complies with all state and federal rules and regulations and does not unlawfully discriminate on the basis of race, color, creed, religion, national origin, age, sex/gender, marital status, or the presence of any sensory, mental or physical disability.

**AFFIRMATIVE ACTION INFORMATION (Completion of this section is OPTIONAL)**

Name: \_\_\_\_\_ This information is to ensure equal employment opportunity under an affirmative action program. Upon receipt, this information will be separated from your application. To assist in this program, please answer the following questions:

**RACE OR CULTURAL GROUP:**

White    Spanish Surnamed American    American Indian    Black    Asian American  
 Other

**SEX**

Male    Female

**DATE OF BIRTH:** \_\_\_\_\_

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application.

PLEASE PRINT, except for signature on last page of Application. NCS will make reasonable accommodation in the application process, if needed.

**NAME (Print)** \_\_\_\_\_ **TODAY'S DATE** \_\_\_\_\_  
                                 **Last**                                **First**                                **Initial**

**PRESENT ADDRESS** \_\_\_\_\_  
                                 **No.**                                **Street**                                **City**                                **State**                                **Zip**

**PHONE:** Home (\_\_\_\_) \_\_\_\_\_ **Work**(\_\_\_\_) \_\_\_\_\_ **Mes.**(\_\_\_\_) \_\_\_\_\_

**Position applied for:** \_\_\_\_\_

**When are you available for employment?** \_\_\_\_\_

**Bilingual?** Yes \_\_\_ No \_\_\_ **Language(s)** \_\_\_\_\_ **Sign Language?** Yes \_\_\_ No \_\_\_

**Which type of employment are you seeking:** Full-time \_\_\_ Part-time \_\_\_ Temporary \_\_\_

**Have you applied with this district before?** Yes \_\_\_ No \_\_\_ **Approximate date:** \_\_\_\_\_

**RECORD OF EMPLOYMENT**

1. Name of Current/Most Recent Employer		Address	Phone	Type of Business
Dates Employed		Rate of Pay		
From Month	Year	Starting	Ending	Reason for Leaving
				Supervisor's Name and Phone Number

List the jobs you held, duties performed, skills used or learned, advancements or promotions.

May we contact this employer? Yes \_\_\_ No \_\_\_

1. Name of Next Previous Employer		Address	Phone	Type of Business
Dates Employed		Rate of Pay		

From Month      Year	Starting      Ending	Reason for Leaving	Supervisor's Name and Phone Number
List the jobs you held, duties performed, skills used or learned, advancements or promotions.			

May we contact this employer? Yes \_\_\_ No \_\_\_

1. Name of Next Previous Employer		Address	Phone	Type of Business
Dates Employed		Rate of Pay		
From Month      Year	Starting      Ending	Reason for Leaving	Supervisor's Name and Phone Number	
List the jobs you held, duties performed, skills used or learned, advancements or promotions.				

May we contact this employer? Yes \_\_\_ No \_\_\_

1. Name of Next Previous Employer		Address	Phone	Type of Business
Dates Employed		Rate of Pay		
From Month      Year	Starting      Ending	Reason for Leaving	Supervisor's Name and Phone Number	
List the jobs you held, duties performed, skills used or learned, advancements or promotions.				

May we contact this employer? Yes \_\_\_ No \_\_\_

**Are you authorized to work in the Unites States?** Yes \_\_\_ No \_\_\_

(Federal law requires proof of identity and employment authorization for all new employees.)

**Have you completed the fingerprinting procedure through Oregon Dept. of Ed?** Yes \_\_\_ No \_\_\_

<b>EDUCATION</b>	<b>SCHOOL NAME</b>	<b>MAJOR SUBJECTS</b>	<b>DEGREE</b>
Circle last year completed High School 1 2 3 4	_____	_____	_____
College 1 2 3 4	_____	_____	_____
Other job related education: _____			

**Please list all job-related software, hardware, skills, special training, etc.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test in compliance with ORS 674 and OAR 581-22-716.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without consequential omissions, and understand that, if employed, omissions and/or false statements on application or during any interviews may result in dismissal.

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

\_\_\_\_\_  
Date

**NIXYÁAWII COMMUNITY SCHOOL  
EMPLOYMENT APPLICATION**

**AUTHORIZATION OF RELEASE OF INFORMATION  
FOR SENSITIVE POSITION  
AND PRE-EMPLOYMENT DRUG TESTING**

EDUCATION, CREDIT, CRIMINAL, DEPARTMENT OF MOTOR VEHICLES, REFERENCE  
AND PRIOR EMPLOYMENT RELEASE  
AND OTHERS AS NEEDED.

An official of Nixyáawii Community School shall conduct an employee background investigation on all applicants applying for a Sensitive Position. This includes all employment opportunities where the applicant is directly in contact with students of Nixyáawii Community School. A Sensitive Position will be identified on the Job Announcement and the applicant will be advised that a background investigation will be conducted including, but not limited to criminal, credit, employment, education, and Department of Motor Vehicle records. A pre-employment drug test will also be required.

The applicant will be required to complete this form and authorize the background check to be considered for the position.

JOB TITLE: \_\_\_\_\_

I authorize Nixyáawii Community School to investigate all information in my records and request any agency holding such information as described above to share such information as required by Nixyáawii Community School.

\_\_\_\_\_  
Print Authorizing Name

\_\_\_\_\_  
Authorizing Signature

\_\_\_\_\_  
Current Date

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

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Driver's License State and Number