## DE SMET SCHOOL DISTRICT 38-2 PO BOX 157 DE SMET, SD 57231

			l		
Address				Telephone	
City	Stat	te	Zip	Zip	
Position you a	re applying for:				
Name of Scho	ool(s) Attended	Location	Diploma	a/Degree	Dates Attended
NOTE: Please att	tach a copy of your	r high school diplon	na, high school	transcript or	GED to this applica
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De Smet School District does not discriminate on the basis of race, color, national origin, gender, disability, religion and creed, or marital status.

1.	Do you have a physical or mental condition which would require consideration in assignment to the position for which you are applying?					
	If so, please					
	explain					
2.	Have you ever been convicted of any misdemeanor or felony, including any major traffic offenses or					
	had such a conviction purged? If so, please indicate the offense, and where it occurred.					
3.	Have you served in the military? Yes $\square$ No $\square$					
	If yes, did you receive an honorable discharge? Yes $\square$ No $\square$					
	If yes, do you have a service-connected disability Yes $\square$ No $\square$					
	Military Branch: Dates Served://					
By	signing below, you are confirming that the information contained in this application is an accurate					
-	mmary of your individual record to date.					
Siç	gnature of Applicant					
Re	turn this application to:					
	perintendent of Schools					
De	Smet School District  Box 157					

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