

**FORSYTH PUBLIC SCHOOLS**  
**[www.forsythpublicschools.org](http://www.forsythpublicschools.org)**

**SUPERINTENDENT APPLICATION PACKET**

Forsyth Public Schools is seeking a Superintendent to start July 1, 2022 who is energetic and enthusiastic and is willing to lead the Forsyth Public Schools with 21<sup>st</sup> century educational philosophy, curriculum implementation and learning while continuing the tradition of excellence. Forsyth Public Schools is a class B school district with 61 staff members serving approximately 300 students K – 12. Forsyth, Montana is located along the Yellowstone River 100 miles east of Billings, Montana and 45 miles west of Miles City, Montana.

**Applications should include the following:**

- \* Letter of Application
- \* Current Resume with minimum of 3 References
- \* Completed District Application
- \* Narrative of Self and Work/Job Experience
- \* Transcripts
- \* Montana Class 3 Administrative Certificate showing Superintendent's Endorsement
- \* Copies of other current certificates/endorsements
- \* Three current letters of recommendation
- \* Consent to Fingerprint Background Check

Please contact:

Stacy Montgomery, Business Manager  
Forsyth Public Schools  
PO Box 319, Forsyth, MT 59327

[smontgomery@forsyth.k12.mt.us](mailto:smontgomery@forsyth.k12.mt.us)

Phone: 406-346-2796 x 5101  
Fax: 406-346-7455

**FORSYTH PUBLIC SCHOOLS**

425 North 10th Avenue  
PO Box 319  
Forsyth, Montana 59327  
(406) 346-2796  
(406) 346-7455 FAX

AN EQUAL OPPORTUNITY EMPLOYER  
THAT ENCOURAGES APPLICATIONS  
FROM ALL PERSONS  
REGARDLESS OF RACE,  
RELIGION, SEX, AGE,  
NATIONAL ORIGIN  
OR HANDICAP

**SUPERINTENDENT APPLICATION**

FOR DISTRICT USE ONLY

Date Application Received \_\_\_\_\_

Application Material Received:

Letter of Application \_\_\_\_\_

Resume \_\_\_\_\_

District Application \_\_\_\_\_

Narrative \_\_\_\_\_

Transcripts \_\_\_\_\_

Placement Papers/Letter of

Recommendation \_\_\_\_\_

Copy of Certificate \_\_\_\_\_

Reviewed by \_\_\_\_\_

Notification: Letter \_\_\_\_\_ Phone \_\_\_\_\_

Position \_\_\_\_\_

Creditable Years of Experience: \_\_\_\_\_

Degree \_\_\_\_\_ Credits \_\_\_\_\_

**TO THE APPLICANT:** After completing this form, return it to:

**Stacy Montgomery, Business Manager**  
**Forsyth Public Schools**  
**PO Box 319**  
**Forsyth, MT 59327-0319**

NAME \_\_\_\_\_  
LAST FIRST MIDDLE

PRESENT ADDRESS \_\_\_\_\_  
MAILING

\_\_\_\_\_  
CITY STATE ZIP

\_\_\_\_\_  
TELEPHONE (PLEASE INCLUDE AREA CODE)

\_\_\_\_\_  
CELLPHONE (PLEASE INCLUDE AREA CODE)

\_\_\_\_\_  
EMAIL ADDRESS

The information contained on this form is sought in good faith. It will not be used in any way to discriminate against any applicant for employment in violation of State or Federal law.



**WORK EXPERIENCE – cont.**

NAME AND LOCATION OF SCHOOL	DATES	NUMBER OF YEARS	POSITIONS HELD
_____	_____	_____	_____
_____	_____	_____	_____

PHONE: \_\_\_\_\_

_____	_____	_____	_____
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PHONE: \_\_\_\_\_

**TOTAL YEARS OF CERTIFIED/FULL-TIME SERVICE** \_\_\_\_\_

(Do not include partial years of time other than full-time.)

**DATE OF CONSIDERATION:**

Are you presently under contract? \_\_\_\_\_ If so, Where? \_\_\_\_\_

May we contact current employer?      Yes      No

(If "No", please explain)

Work Phone Number \_\_\_\_\_ (Please include area code)

Date Available: \_\_\_\_\_

Have you ever been released from your position or resigned during a contract year?

Yes      No

If "Yes", briefly explain.

**Since you are applying for a position that involves working with children, please complete the following section and the "Consent to Fingerprint Background Check" form which is attached:**

Have you within the past seven (7) years been released from prison or been convicted of any offense that involves any form of violence, such as assault, rape, child abuse, child molesting, contributing to the delinquency of minors, extortion, blackmail, coercion or any crime which involves drugs?

Yes      No      If "Yes", please explain nature of crime, place and date:

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**Since you are applying for a position that often involves handling of money or school district property, please complete the following section:**

Have you within the past seven (7) years been convicted of any offense that involved embezzlement, fraud, stealing, robbery, extortion, blackmail or coercion?

Yes      No      If "YES", please explain nature of crime, place and date:

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**CERTIFICATION:**

Do you hold a valid Montana Certificate?      Yes      No      Folio Number \_\_\_\_\_

Class of Certificate \_\_\_\_\_, Level of Certificate \_\_\_\_\_, Expiration Date \_\_\_\_\_

If you do not hold a Montana Certificate, proof of application must accompany this application or your application will not be processed. Write to the Director of Certification, Office of Public Instruction, P.O. Box 202501, Helena, Montana 59620-2501. Forsyth School District #4 does not assume any responsibility for your certification. Failure to register your certificate with the Office of the County Superintendent of Schools within the first sixty days of school will result in the District holding any further wages until your certificate is so registered and may be cause for termination.

**IMPORTANT:**

Application will not be considered unless all requested information is on file. It is your responsibility to request your school of record to forward a transcript and placement file; further, all information on application should be accurately completed.

**I hereby authorize Forsyth Schools to inquire as to my record with any and all of my former, current employers or references with no liability arising there from. I guarantee the correctness of this application. The making of any false statement herein will be sufficient cause for dismissal. I understand that misrepresentation or omission of facts called for is cause for dismissal.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**NARRATIVE:**

Please describe, in 500 words or less, how you would be a significant addition to the staff of Forsyth Public Schools and the Forsyth Community.