

PLEASE ANSWER QUESTIONS COMPLETELY. INCOMPLETE RESPONSES WILL RESULT IN YOUR APPLICATION NOT BEING PROCESSED.

1. Do you have at least one year of paid experience working with children in an educational or recreational setting? Yes [] No []

IF YES, COMPLETE SECTION BELOW:

Type of Setting	Begin/End Dates	Location	Description of Duties Performed
Recreational			
Educational			

2. Do you have at least one year paid experience supervising in a professional setting? Yes [] No []

IF YES, COMPLETE NEXT SECTION:

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Type of Professional Setting	No. of People Supervised	Begin/End Dates	Location	Description of Duties Performed

3. Have you taken college course work in the area of science, education, and/or related field. Yes [] No []

IF YES, PLEASE ATTACH A PHOTOCOPY OF YOUR TRANSCRIPT.

OR

Do you have experience in the area of science, environmental education, education, and/or a related field? Yes [] No []

IF YES, PLEASE COMPLETE SECTION BELOW:

Field of Experience (Science, Education, Environmental Educ or Related Field)	Begin/End Dates	Location	Description of Duties

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Field of Experience (Science, Education, Environmental Educ or Related Field)	Begin/End Dates	Location	Description of Duties

5. Do you have a valid First Aid and CPR card? Yes [] No []

IF YES, PLEASE ATTACH A PHOTOCOPY.

6. Do you have experience in a residential setting? Yes [] No []

IF YES, PLEASE COMPLETE THE SECTION BELOW:

Residential Setting	Begin/End Dates	Type of Setting/Location	Description of Duties

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7. Do you hold or are you able to obtain a valid Oregon Food Handlers card prior to the first day on the job? Yes [] No []

IF YES, PLEASE ATTACH A PHOTOCOPY.

NOTE: FOR INFORMATION ON HOW TO OBTAIN A FOOD HANDLER'S CARD CALL: 503-248-5257.

8. Do you have a valid driver's license? Yes [] No []

If yes, valid in state of _____ Driver's License No. _____

9. Do you have a vehicle available for on-the-job use? Yes [] No []

If yes, what type of vehicle? _____

I hereby certify that this application contains no misrepresentations or falsifications and that the information is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or dismissal from employment. I authorize the Multnomah Education School District to make any necessary and appropriate investigations to verify the information contained herein and to do employment reference checks.

Signature: _____

Date: _____