

PRAIRIE FARM PUBLIC SCHOOL DISTRICT
630 S. RIVER AVENUE
PRAIRIE FARM, WI 54762
GENERAL APPLICATION FOR EMPLOYMENT

All statements made by applicants for employment on this application form will be checked for accuracy. We offer equal employment opportunities to all persons without regard to sex, race, national origin, religion, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional, or learning disability or handicap.

NAME _____ DPI Entity #: _____

ADDRESS _____

E-MAIL _____ PHONE _____

POSITION FOR WHICH YOU ARE APPLYING _____

PREVIOUS WORK EXPERIENCE

Previous Work Experience #1

Employer: _____ City/State: _____

Position: _____ Start Date: _____ End Date: _____

Previous Work Experience #2

Employer: _____ City/State: _____

Position: _____ Start Date: _____ End Date: _____

Previous Work Experience #3

Employer: _____ City/State: _____

Position: _____ Start Date: _____ End Date: _____

EDUCATION

School	Years Completed	Indicate Diploma, Certificate or Degree
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_____ (High School)	_____	_____
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_____ (College / Tech School)	_____	_____
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_____ (Other Training)	_____	_____
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1) Do you have the legal right to work in the United States? ____Yes ____No
If not, why? _____

2) Have you ever been convicted of a crime except a minor traffic violation?
____Yes ____No
If yes, state citation, date, court, and place where offense occurred _____

3) Have you ever been discharged or requested to resign from a position?
____Yes ____No
If yes, give circumstances _____

4) Have you ever applied for a job with us before? ____Yes ____No
List the job applied for _____

5) Are you employed now? ____Yes ____No

REFERENCES

Give names of three references who have first-hand knowledge of your character, personality and work performance. Do not list relatives.

Reference Name: _____ Phone Number: _____
Relationship to Applicant: _____

Reference Name: _____ Phone Number: _____
Relationship to Applicant: _____

Reference Name: _____ Phone Number: _____
Relationship to Applicant: _____

PERSONAL STATEMENT

Prepare a handwritten statement to include any experience or talent which in your estimation will contribute to your success in the position for which you are making application.

The applicant is free to attach any other supporting documentation that can enhance their candidacy.

JOB APPLICANT AGREEMENT AND CERTIFICATION

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in the application to verify my statements, and I authorize the past employers, all references and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create any employment contract between this employer and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the employer unless made in writing.

I understand that prior to being offered employment I may be requested to take an employment examination. In the event I have a disability which will affect my ability to take the test, I will so inform the employer prior to the administration of the test so that reasonable accommodations can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. The employer reserves the right to require medical documentation concerning the need for accommodations.

I understand that if I am recommended for employment, the employer may run a criminal background check and that a physical entrance examination must be satisfactorily completed that may include drug testing.

I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures, in whole or in part, at any time.

I understand that this application will be kept on active file for thirty days from the date completed, after which time I would have to reapply in accordance with established district procedures.

Signature of Applicant

Date