

EMPLOYMENT APPLICATION - Associate school district of north fond du lac



Date:		Oate Available:				
All questions must be answered carefully and completely. If you have a resume necessary, please attach it to this application). You must still complete the application in entirety. PLEASE TYPE OR PRINT.						
cities ty. The	ISE THE ORTHUM.	<u>Title of Posit</u>	Title of Position Applying For:			
PERSONA	AL DATA					
Name:						
Last		First		Middle		
Address						
	Number, Street, City, St	ate and Zip Code				
Phone – Daytime (Cell): Night – (ome):			
Email Address	s:					
Have you ever	worked under another n	No				
_		es, or other names you h hen these names were use		ding all previous		
Name			When used	<u> </u>		
Name			When used			
Position Apply	ying For:	Loca	Location Desired:			
Check Type of	f Employment Desired:	Full Time	Part Time _	Temporary		
Are you:						
•	Over the age of 18?		Yes	No		
	A previous applicant?		Yes	No		
	A previous employee?		Yes	No		
	Legally able to work in	the United States?	Yes	No		
	A licensed driver with a	car available for work?	Yes	No		
If an Alien:	-	mber:				
If Naturalized:		mber:				
	Place of Natural	ization:				
		City	County	State		
List all langua	ges spoken or written: _					

EDUCATION AND TRAINING RECORD

Please complete all appropriate items.

Name & Location of School

High School			Diploma?YesNo	Fields of Study
College or University			Degree Awarded? Yes No Type of Degree:	
College or University			Degree Awarded? Yes No Type of Degree:	
Other Training (explain)				
EMPLOYMEN WORK EXPERIENT Note: Start with most rec	CE (last 10 years)		cessary.	
Present/Last Employer	Type of Busine	ess Address]	Phone Number
Start Date / Leave Date	Reason for Lea	aving		
Job Title	Name of Super	Name of Supervisor/Title		
Description of job and o	luties:			
	Les an			
<u>Employer</u>	Type of Busine	<u>Address</u>		<u>Phone Number</u>
Start Date / Leave Date	Reason for Lea	aving		
Job Title	Name of Super	rvisor/Title		

Dates Attended

Degree Earned

<u>Employer</u>	Type of Business	Address	Phone Number
Start Date / Leave Date	Reason for Leaving		
Job Title	Name of Supervisor/		
Description of job and duties:			
Have you ever been as by an employer within If your answer to either APPLICANT STA I affirm that I have answer District of North Fond drauthorize any necessary application from all previous that I may be subject to a control I also hereby release from for seeking, gathering and persons or organizations for Signature: [All qualified applicants red	sked to resign, or be the last 10 years? The last 10 years? The above quest are of the above quest are all questions to u Lac, I realize far personnel to verify ous employees, educational record check liability the North dusing such informor providing such informor prov	een threatened with disch YesNo tions is yes, describe the carefully before the best of my ability. It lise information will be go the accuracy of informational institutions and carefully according to the discovery of the properties of the accuracy	e signing) f employed in the School grounds for dismissal. I mation contained in this references. I understand yment. rict and its representatives nt decisions and all other

BUSINESS OFFICE USE ONLY

Notes and Comments: