Independent School District #676

P.O. Box 68
Badger, Minnesota 56714
Phone: 218-528-3201
Fax: 218-528-3366

APPLICATION FOR EMPLOYMENT

Non-Licensed Position

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

INSTRUCTIONS:

1. The accuracy and completeness with which this application is filled out will be factors in the consideration of the applicant for a position.
2. Include three letters of reference, a copy of your teaching license, and an official transcript. All materials should be forwarded to the above address.
3. Application will be kept on file for one year unless notice of continued interest along with any additional up-to-date information is received from the applicant.

It is the policy of the Board of Education of District #676 to comply with federal and state law prohibiting discrimination and all requirements imposed by or pursuant to regulations issued thereto, to the end that no person shall, on the grounds of race, color, national origin, creed, religion, sex, marital status, status with regard to public assistance, age, or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under any educational program or in employment, or recruitment, consideration, or selections; thereto, whether full-time or part-time under any education program or activity operated by the District for which it receives federal financial assistance.

Personal Information

Name: _____ Date of Application: _____
(last) (first) (mid)

Present Address: _____
(street) (city) (state) (zip)

Permanent Address: _____
(street) (city) (state) (zip)

Summer Address: _____
(street) (city) (state) (zip)

Present Phone: _____ Permanent Phone: _____

E-MAIL: _____

FOR OFFICE USE ONLY:

Application Received: _____
Resume' Received: _____
Credentials Received: _____

Interviewed: On _____ by _____
On _____ by _____
On _____ by _____

Applicant Notified: _____
Board Approval: _____
Employment Date: _____

Education

	High School	Undergraduate College/University	Graduate/ Professional
School Name and Location			
Years Completed			
Diploma/Degree			
State any additional information you feel may be helpful to us in considering your application			

INDICATE ANY FOREIGN LANGUAGES YOU CAN SPEAK, READ, AND/OR WRITE

	FLUENT	GOOD	FAIR
Speak			
Read			
Write			

References

Give name, address, and telephone number of three references. References should not be related to you.

1.

2.

3.

Military Experience

Have you had job-related training in the Armed Forces of the United States? ☐ Yes ☐ No
If yes, specify:

VETERANS' PREFERENCE: If you are a veteran, or the spouse of a deceased or disabled veteran, and wish to claim Veterans' Preference, you must present a legible photocopy of you DD214 to the school district Superintendent. If your claim is approved, five or ten additional points will be added to your final employment examination passing score.

Do you wish to claim Veterans' Preference? ☐ Yes ☐ No

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, or other protected status.

Employer	Dates Employed	
Address	From	To
Telephone Number(s)		
Job Title	Supervisor	
Description of Work Performed		
Reason for Leaving		

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Reason for Leaving		

Complete the section that pertains to the position for which you are applying.

Bus Driver

License Information:

Issuing State: _____ License No.: _____

License Classification: _____ Expiration Date: _____

Endorsements: _____

Driving Experience:

Type of Equipment	Dates of Operation	Total Miles of Operation
Bus	From _____ To _____	_____
Straight Truck	From _____ To _____	_____
Tractor/Trailer	From _____ To _____	_____
Other	From _____ To _____	_____

Accident Record for the Past Three Years:

	Date of Accident	Nature of Accident (head-on, rear-end, etc.	No. of Injuries	No. of Fatalities
Last Accident	_____	_____	_____	_____
Next Previous	_____	_____	_____	_____
Next Previous	_____	_____	_____	_____

Traffic Convictions & Forfeitures for the Past Three Years: (list only those that are not parking violations)

Location (City/State)	Date	Charge	Penalty
_____	_____	_____	_____
_____	_____	_____	_____

Custodial / Grounds / Maintenance

Do you have a low-pressure boiler license? ☐ Yes (If so, attach a copy of your license) ☐ No

Please check the following that you have operated:

Floor Maintenance Equipment: ☐ Scrubbers ☐ Buffers ☐ We/Dry Vacuums

Ground Care Equipment: ☐ Heavy Equipment ☐ Front End Loaders ☐ Dump Trucks

☐ Snow Blowers ☐ Riding Mowers ☐ Push Mowers ☐ Tractors

Are you familiar with fertilizers and its application? ☐ Yes ☐ No

Are you familiar with tree and shrubbery trimming? ☐ Yes ☐ No

Carpentry Experience:

Have you ever operated: ☐ Table Saws ☐ Electrical Saws ☐ Electric Miter Saws

☐ Other _____

Are you familiar with steam heat and its application? ☐ Yes ☐ No

Are you familiar with electrical heat and its application? ☐ Yes ☐ No

Are you familiar with hot water heat and its application? ☐ Yes ☐ No

Clerical

Check all equipment you are familiar with: ☐ Adding Machines ☐ Macintosh Computer ☐ PC Compatible

List the computer software/hardware you are familiar with:

_____

_____

Food Service

Do you have experience as a cook for large groups? ☐ Yes ☐ No If so, how many people? _____

What type of work are you interested in?

☐ Full-Time
☐ Part-Time
☐ Substitute

List the types of food service equipment you are familiar with: _____

_____

_____

_____

Paraprofessional

What type of work are you interested in?

☐ Full-Time
☐ Part-Time
☐ Substitute

Please list any special abilities (artistic, musical, etc.) you may possess: _____

_____

_____

_____

Please state, as briefly as you can what you believe is the role of a paraprofessional: _____

_____

_____

_____

_____

_____

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that this application for employment shall be considered active for a period of time not to exceed one year. I further understand that any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.

In the event of employment, I understand that false or misleading information given in may application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

_____ _____

Applicant's Signature Date