## **BARNEVELD SCHOOL DISTRICT**

## (an equal opportunity employer) Employment Application 304 S. Jones Street/PO Box 98 Barneveld, WI 53507-0098

Position for which you are applying					Date of Application				
*This must be filled in*									
Each item of this application is important. Please read and complete carefully and accurately. (Please Print) Failure to Answer all Questions may result in Rejection of the Application									
Last Name	First Name				Middle Name				
Present Street Address City		City	State Zip Code			Telephone Number No. of yrs at this residence			
Street Address to Which You Wish Correspondence Sent			t City	City State Zip Code			Telephone Number		
Date You Will Be Available Soc			Social Security	ial Security #			Driver's License #		
Have You Filed an Application With Us Before?				Under What Name					
	Yes When? Date: Name:								
High School Location									
Extracurricular Activities									
Additional Education (Most Recent First)									
Name and Location of School		Dates Attended Mo./YrMo./Yr.	Degree	Grade Avg.	Point Scale	, · · · · · · · · · · · · · · · · · · ·			
		1101/1111101/111							
Have you ever been conv No Yes. Ans conducts criminal backgr	swering yes to	this question wil	l not necessari	ly preclud	e considera	ation of your applicat	tion for emp	ployment. The School District	
Work Experience (List Mo	ost Recent Fir	rst)							
Dates (Month/Year) From To Employe		er Type of Work		Р	Your osition	Your Highest Rate of Pay		eason or Leaving	
Supervisor (Name, Title,	Telephone)								
Dates (Month/Year) From To Employer		Type of Work			Your osition	Your Highest Rate of Pay		eason or Leaving	
Supervisor (Name, title, <sup>-</sup>	Telephone)								
Dates (Month/Year) From To	Employe	er .	Type of Work		our osition	Your Highest Rate of Pay		Reason For Leaving	
Supervisor (Name Title	Tolonhono\								
Supervisor (Name, Title, Telephone)									
The district requires a physical examination and tuberculosis test of every employee. You have any handicapping condition(s) which might affect your ability to perform effectively in the position for which you are applying No Yes. If yes, what accommodations can the school district provide to assist you?									

(over)

Have you ever been non renewed/terminated/or fired?NoYes
If yes, please give an explanation in the space provided.
Have you ever resigned, quit, or left employment under the circumstances of being non
renewed/terminated/ or fired?NoYes
If yes, please give an explanation in the space provided.

Please list three (3) personal references:						
Name	Relationship (family member, pastor, friend, etc.)	Phone Number				
1.						
2.						
3.						

My signature certifies that all statements made on this application are true and complete to the best of my knowledge. I
understand that any false information or misrepresentation of factual information contained herein may be cause for
dismissal. I authorize the district to contact past employers and other references. I understand that only the Board of
Education can offer me an employment contract. Any discussion with the Administrator or other employee about wages or work conditions are not binding and will not be construed as an offer or guarantee of employment. If I am hired, I authorize the district to respond to reference checks from future employers.

The Barneveld School District does not discriminate on the basis of sex, race, color, religion, creed, age, national

District Administrator, Joe Price, Compliance Coordinator for Title IX and Section 504 and ADA.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

origin, ancestry, pregnancy, marital status, sexual orientation, or disability.

Complaints may be filed in the District Administrator's office at the following address: 304 S. Jones St., Barneveld, WI 53507. Telephone number 608-924-4711, email <u>iprice@barneveld.k12.wi.us</u>.