

Henning ISD #545
500 School Avenue • Henning, MN 56551

Non-Certified Application

| | | | |
|-----------------------|--------------------------|-----------|--|
| Name: | Date: | | |
| Address: | | | |
| City: | State: | Zip Code: | |
| Telephone Number: | Social Security Number: | | |
| Email Address: | | | |
| Position Applied For: | Date Available For Work: | | |

Personal Information

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|------------------|
| Military Status: |
|------------------|

Education

| | |
|-----------------------|--------------------------------------------------------------------|
| High School Attended: | Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| High School Address: | |

| College/Technical Schools Attended | Address | Dates | Degree |
|------------------------------------|---------|-------|--------|
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If you are applying for a Para-Professional position, you must satisfy the requirements of the Elementary and Secondary Education Act (No Child Left Behind) by one of the following. Please mark the requirement(s) you meet. Documentation must be provided with the application before you will be considered for a position.

Associate Degree ☐ Two years of college credit ☐ Passed state or national test ☐

Work Experience

List most recent position first.

| Employer | Dates (from/to) | Address | Position | Reason for Leaving |
|----------|-----------------|---------|----------|--------------------|
| | | | | |
| | | | | |
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| References | | |
|------------|---------|-----------|
| Name | Address | Telephone |
| | | |
| | | |
| | | |

List community organizations of which you are a member.

List all licenses and certificates you hold.

Number of days absent from work last year:

Have you ever?

Each question must be answered.

| | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Been dismissed from employment with a school system or been asked to resign | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Pled guilty to or no contest to, or been convicted of or had charges dismissed for an offense relating to the manufacture, distribution, sale or possession of any illegal drugs? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Pled guilty to or no contest to, or been convicted of or had charges dismissed for any other criminal offense other than a minor traffic offense? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Received an unsatisfactory performance evaluation from an employer? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

IF THE ANSWER TO ANY OF THE ABOVE QUESTIONS IS YES, you must provide a detailed explanation on a separate sheet attached to this application as to each offense including the specific offense for which you were charged, the disposition of the offense, and the date, court, county and state where you were charged. The furnishing of false or misleading information or the intentional withholding of material facts, including facts concerning one's criminal record will constitute grounds for immediate termination.

Specific Position Information

(Complete only appropriate sections)

Bus Driver Positions (Only)

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|---------------------------------------------------------------------------------------------|------------------|
| Driver's License Number: | Expiration Date: |
| PERA Number if you have one: | |
| School Bus License will be required. A Driver Record Report will be secured from the State. | |
| Driving Experience: | |

Cook Positions (Only)

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Are you a certified Food Service Assistant? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you certified as a Food Service Cook/Manager? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you certified as a Food Service Director? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you certified as a Nutritionist? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| PERA Number if you have one: | |
| Experience as a cook for large groups: | |
| Any physical limitation that would keep you from moving large/heavy food service materials? e.g. large kettles, roasters, commodities, etc. | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Would you be willing to attend Food Service Courses offered through the Minnesota Department of Education? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Custodial Positions (Only)

| | |
|-------------------------------------------------------------------------------------------|------------------------------------------------|
| Do you have a boiler's license? <input type="checkbox"/> Yes <input type="checkbox"/> No | Boiler License No: |
| Boiler Class: | Number of years experience operating a boiler? |
| PERA Number if you have one: | |
| Have you ever operated the following floor maintenance equipment? (Check all that apply.) | |
| Scrubbers: _____ | Buffers: _____ Wet/Dry Vacuums: _____ |

Custodial Positions (Only), Con't.

Have you ever operated the following ground care equipment? (Check all that apply.)

Push Mowers: _____ Snow Blowers: _____ Tractors: _____ Riding Mowers: _____

Front End Loaders: _____ Dump Truck: _____ Heavy Equipment: _____

Are you familiar with fertilizer and its application? ☐ Yes ☐ NoAre you familiar with tree and shrubbery trimming? ☐ Yes ☐ No

Have you ever operated? (Check all that apply.)

Table Saws: _____ Electrical Saws: _____ Electrical Miter Saws: _____ Other: _____

Have you ever? (Check all that apply.)

Done your own wiring? _____ Replaced a ballast? _____ Replaced a fusestat? _____

Replaced a fuse? _____ Wired an outlet? _____

Do you have any limitations that would keep you from moving large/heavy materials? e.g. tables, desks, equipment, etc. ☐ Yes ☐ No**Clerical, Bookkeeping, Secretarial/Clerical Positions (Only)**

Check all that apply:

Are you able to: Take dictation? _____ Type? _____ W.P.M. _____ File? _____

Schedule office work? _____ Use dictating equipment? _____

Have experience with a business telephone system? _____

Do you have computer skills/experience with:

Word processing programs? _____ If so, which programs? _____

Database programs? _____ If so, which programs? _____

Spreadsheet programs? _____ If so, which programs? _____

PERA Number if you have one: _____

Related Experience: _____

CONSENT FOR CRIMINAL BACKGROUND CHECK

I understand that in the event I am offered a position with this school system, I will be required to have a criminal background check. I understand I will be offered only a temporary employment pending the outcome of the criminal record check.

I further understand that the information obtained from the criminal background check may be used in employment decisions. I understand that a criminal record does not automatically exclude me from employment.

I agree and consent for such background check and investigation to be conducted and agree to hold the school system and all officials, representatives, and employees of the foregoing harmless from all claims for libel, slander, defamation of character, invasion of privacy, intentional infliction of emotional stress, negligence, and similar claims.

I understand that, if offered employment by the Henning Board of Education, I am responsible for paying the fee for the background check.

The furnishing of false or misleading information or the intentional withholding of material facts, including facts concerning one's criminal record will constitute grounds for immediate termination.

I consent for any former employer of mine to furnish any information from my personnel file or evaluations relative to my performance as an employee, and I waive any right I may have for such information to remain confidential.

By filing application for employment with the Henning School System, if employed, I agree to abide by all the policies as set forth by the Henning Board of Education. I authorize full investigation of the information given in this application and consent to the representatives of the Henning School System contacting my references, previous employers, schools attended, court officials, and law enforcement authorities. I also understand that any misstatement or omission of any information requested shall be reason for non-employment or dismissal from employment.

This application, transcript, references and other data are the property of the Henning Board of Education and will not be returned to the applicant.

Applicant's Signature: _____**Date:** _____

It is the policy of the Henning Board of Education not to discriminate on the basis of race, color, national origin, sex, age, religion, creed, or disability in educational programs and activities, admission to facilities, or employment practices.