FORT TOTTEN SCHOOL DISTRICT #30

Employment Application



APPLICANT INFORMATION												
Last Name				First					M.I.	Date		
Street Address									Apartment/Unit #			
City	State					ZIP						
Phone				E-mail	E-mail Address							
Date Available Social Se				curity No.				Des	Desired Salary			
Position Applied for												
Are you a citizen of the United States? YES \(\sqrt{NO} \) NO \(\sqrt{If no, are you authorized to work in the U.S.? YES \(\sqrt{NO} \) NO										NO 🗆		
Have you ever worked for this company? YES □ NO □ If so, when?												
Have you ever been convicted of a felony? YES \(\square\) NO \(\square\) If yes, explain												
EDUCATION												
High School				Address								
From	То	Did you graduate?		YES 🗌	NO [NO Degree						
College				Address								
From	То	To Did you graduate?			S NO Degree							
Other	ther				Address							
From	То	Did you g	raduate?	YES 🗌	NO [Degree					
REFERENCES												
Please list three p	rofessional refer	rences.										
Full Name							Relationship					
Company						Pho	ne ()				
Address												
Full Name						Relationship						
Company						Pho	ne ()				
Address												
Full Name							Relationship					
Company						Phoi	ne ()				
Address												

PREVIOUS EMPLOYMENT									
Company		Phone ()							
Address			Supervisor						
Job Title		Starting Salary	\$		Ending Salary \$				
Responsibilities									
From To		Reason for Leaving	I						
May we contact your previous supervisor for a reference? YES NO									
Company			Phone ()						
Address		Supervisor							
Job Title			Starting Salary	\$		Ending Salary \$			
Responsibilities									
From To		Reason for Leaving							
May we contact your previous	visor for a reference?	NO 🗆							
Company		Phone ()							
Address		Supervisor							
Job Title		Starting Salary	\$		Ending Salary \$				
Responsibilities									
From To		Reason for Leaving							
May we contact your previous supervisor for a reference? YES NO									
MILITARY SERVICE Branch		From To							
Rank at Discharge					Type of Discharge				
If other than honorable, explain									
Tribal Affiliation: Enrollment Number:									
APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION (PLEASE READ BEFORE SIGNING)									
I certify that answers given herein are true and complete. I hereby certify that there are no omissions, misrepresentations, or falsifications. I understand that, if I am hired by the Fort Totten School District, false or misleading information given in this Application, resume, or interview(s) may be grounds for immediate termination of my employment. I understand, also, that I am required to abide by all rules and policies of The Fort Totten School District. I hereby authorize The Fort Totten School District to conduct any and all necessary inquiries as to my character, reputation, background and ability to perform in the position I am applying for. I specifically authorize The Fort Totten School District to contact any and all of the educators, employers and references listed on my submitted resume and background information, and I authorize such educators, employers, and references to release to The Fort Totten School District any and all information, orally or in writing (including documents and/or other records) regarding my education, employment history, background and any other matter related to my Application for employment with The Fort Totten School District, and I hereby release such persons from any and all legal liability in connection with the same. I understand and agree that upon receiving a conditional offer of hire, I will be required to submit to national and state criminal record checks, drug testing, and fingerprinting, and I fully authorize The Fort Totten School District to conduct any and all such tests and background checks. I agree to cooperate with same and hereby release The Fort Totten School District from any and all legal liability in connection with the same. I hereby understand and acknowledge that any employment relationship with The Fort Totten School District is of an "at will" nature. BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.									
Signature Date									