



## LINN JT. 6 SCHOOL DISTRICT

Reek Elementary School  
W4094 South Lakeshore Drive  
Lake Geneva, WI 53147  
Phone: (262) 248-4120  
Fax: (262) 248-5133

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### **APPLICATION FOR EMPLOYMENT**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Date: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Present Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position Applying For: \_\_\_\_\_

### **Work Experience-Most Recent First**

Employer: \_\_\_\_\_

Date of Employment: From \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Description of Position/Duties: \_\_\_\_\_

Employer: \_\_\_\_\_

Date of Employment: From \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Description of Position/Duties: \_\_\_\_\_

Employer: \_\_\_\_\_

Date of Employment: From \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Description of Position/Duties: \_\_\_\_\_

May we contact supervisor (s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

When are you available to start work? \_\_\_\_\_

Salary at last job? \_\_\_\_\_

### **Educational Background-Most Recent First**

School: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Diploma: \_\_\_\_\_

School: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Diploma: \_\_\_\_\_

### **Background Check**

Linn Jt. 6 School District conducts background checks on all adult employees. May we do a background check? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain \_\_\_\_\_

\_\_\_\_\_

This information is optional and will be used only for the purpose of the background check. It will not be considered for employment purposes.

Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Maiden Name \_\_\_\_\_

### References

<u>Name and Relationship</u>	<u>Address</u>	<u>Email Address</u>	<u>Phone Number</u>

Linn Jt. 6 School District does not discriminate on the basis of sex, race, national origin, ancestry, creed, religion, pregnancy, marital or parent status, sexual orientation, or physical, mental, emotional, or learning disability or handicap as required by s.118.13 Wis. Stats.

I certify that the facts contained in this application are true and complete to the best of my knowledge. I further understand that falsified statements on this application can be considered as sufficient cause of discharge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this application to Tami Martin, District Administrator at [tmartin@linn6.k12.wi.us](mailto:tmartin@linn6.k12.wi.us) or in person at:

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