

Application for Employment
Classified Position



USD 239, NORTH OTTAWA COUNTY

716 E. Seventh St., PO Box 257

Minneapolis, Kansas 67467

(785) 392-2167

www.usd239.org

RESUMÉ MAY BE ATTACHED TO THIS FORM

DISTRICT OFFICE USE ONLY

All classified positions are "at will" and can be terminated at any time, with or without cause or advanced notice by either party.

USD 239 North Ottawa County, 716 E. Seventh St., PO Box 257, Minneapolis, Kansas, shall not discriminate on the basis of sex, race, color, national origin, or handicap in the educational programs or activities which it operates.

POSITION APPLIED FOR – Check all that apply

- Secretarial / Clerical
- Paraprofessional / Aide
- Food Service
- Maintenance / Custodial
- Transportation
- Other: _____

If applying for a position that involves working with students, please complete:

Age Level:

- Elementary (K – 6)
- Middle School / Jr-High (7-8)
- High School (9-12)

DEMOGRAPHICS:

Date: _____ Email: _____

Last Name: _____ First: _____ Middle: _____

Street Address: _____ Mailing address (if different) _____

City: _____ State: _____ Zip: _____

Contact Numbers Home: _____ Cell: _____ Other: _____

Are you interested in: Full-time Work Substituting Desired wage: \$ _____ per _____

Have you ever filed an application with us before? Yes No If yes, give approximate date: _____

Have you ever been employed by USD 239 before? Yes No If yes, give approximate date: _____

Are you retired under the KPERS retirement system? Yes No If retired, when? _____

Are you currently employed? Yes No On what date would you be available for work: _____

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? (Proof of citizenship or immigration status will be required upon employment) Yes No

Have you ever been convicted of a felony or any offense involving moral turpitude? Yes No

EDUCATION (Please check the highest grade level completed) 9 10 11 12 13 14+

	NAME	CITY / STATE	Major	DEGREE
High School / GED				
College				
Other				

EMPLOYMENT REFERENCES / WORK HISTORY

Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the correct telephone numbers of past employers are critical.

MOST RECENT EMPLOYER

Are you currently working for this employer? Yes No
 If yes, may we contact? Yes No

Company Name: _____ City/State: _____
 Phone Number: _____ Supervisor's Name: _____
 Dates Employed: From _____ To _____
 Salary: \$ _____ per _____ Job Title: _____
 Duties: _____
 Reason for Leaving: _____

SECOND MOST RECENT EMPLOYER

May we contact? Yes No

Company Name: _____ City/State: _____
 Phone Number: _____ Supervisor's Name: _____
 Dates Employed: From _____ To _____
 Salary: \$ _____ per _____ Job Title: _____
 Duties: _____
 Reason for Leaving: _____

THIRD MOST RECENT EMPLOYER

May we contact? Yes No

Company Name: _____ City/State: _____
 Phone Number: _____ Supervisor's Name: _____
 Dates Employed: From _____ To _____
 Salary: \$ _____ per _____ Job Title: _____
 Duties: _____
 Reason for Leaving: _____

In addition to your work history, are there other skills, qualifications or experience that we should consider? If so, please list.

REFERENCES

Name	Address	Phone	Relationship

Attach additional information if necessary.

AGREEMENT

1. I agree that all the information provided by me in this application is true and complete. I understand that any misstatement, falsification, or omission of information is grounds for refusal to hire, or if I am hired and the same is discovered thereafter, terminated.
2. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability for any damages that may result from furnishing such information to you. I authorize any background checks by any third party.
3. I authorize you to request, receive and verify all information given on this application and I release you from all damages that may result from your doing so.
4. I authorize you to conduct a criminal background investigation and I release you from all liability for any damages that may result from your doing so.
5. I agree to observe all rules, regulations and policies of the district now in force and effect or as they may change during my employment, if I am hired by the district.
6. I understand and agree that the board has the option of doing a criminal history records check. The board can terminate employment if the results of the criminal history records check reveal that the applicant has been convicted of any offenses specified in law.

Signature of Applicant

Date