WHITE RIVER SCHOOL DISTRICT 47-1 POBOX273 WHITE RIVER SD 57579

Application for Non-Certified Position

Name:		First	Date_		
La	ıst	First	Middle		
Date of Bir	th:				
Present A	ddress:				
				×	
Phone:	-				
Position yo	u are applying	for:			
Name of So	chool(s) Attended	d Locatio	on Diplom	a/Degree	Date
		1			36
application an equivaler	. Teacher aides	must have at leabstitute teachers	st a GED and 4	8 college cred	-
NAME		ADDRI	ESS	PHONE	NUMBER
K 9		W The state of the	(#) V		5*3 E
Describe in : 4) years: in	the space provid clude dates, dut		previous work explain briefly wh	xperiences du y you believe	uring the last fou
			<u> </u>	rall.	7.47 II
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1. Do you have a physical or mental condition which would require consideration in assignment to the position for which you are applying?
Please Explain
2. Have you ever been convicted of any misdemeanor or felony, including any major traffic offenses or had such a conviction purged? If so, please indicate the offense, and where it occurred.
The information contained in this application is an accurate summary of my personal record to date.
Signature of Applicant
Return this application to:
School Administrative Office White River School PO Box273 White River SD 57579

White River School District does not discriminate on the basis of race, color, national origin, gender, disability, religion and creed, or marital status.