

APPLICATION FOR EMPLOYMENT

MARATHON SCHOOL DISTRICT

204 East St.
Marathon, WI 54448
Telephone: (715)443-2227

Position Applying For

PERSONAL

Applicant's full name: Last			First			Middle		
			Phone Number:			If not a U.S. citizen, type of visa:		
			Alternate Number:					
Present address: Street			City			State		Zip Code
Have you ever been known by a different name by any references, schools, or employees listed on this application?				Yes No		If so, indicate name:		
Employment Acceptable:		Regular		<input type="checkbox"/> Full-time	Temporary		<input type="checkbox"/> Full-time	Date available for employment:
				<input type="checkbox"/> Part-time			<input type="checkbox"/> Part-time	
Salary desired:			How were you referred to this organization?					
Have you ever been employed by this agency?			Yes		No		If yes, what position?	
Are you able to provide necessary documentation to establish your identity and authorization to work in the United States under the Immigration Reform and Control Act of 1986?								
				Yes		No		
Have you ever been convicted of a crime?			Yes		No		If so, when: Type of crime:	
A conviction will not automatically disqualify an applicant for a particular job. The seriousness of the crime, the frequency of violations, the applicant's age at the time of conviction, and the applicant's work history will be considered.								

EDUCATION

School	Name & Address of Institution	Major Course of Study	Circle Last Year Completed	Did You Graduate?	Year Graduated	List Diploma or Degrees
HIGH SCHOOL OR G.E.D.	Name		1 2 3 4			
	City, State					
VOCATIONAL TECHNICAL BUSINESS SCHOOL	Name		1 2 3 4			
	City, State					
COLLEGE (Undergraduate)	Name		1 2 3 4			
	City, State					
COLLEGE (Graduate)	Name		1 2 3 4			
	City, State					
	Name					
	City, State					

Additional related courses/training beyond studies listed above:

Professional licenses/certifications:

Type	State	Exp. Date	Registration Number

Please provide the following information for all current and past residences for the previous ten years. Please attach an additional page if more space is required.

RESIDENCES

Month and Year	Address	
to	Address:	City/County/State/Zip:
to	Address:	City/County/State/Zip:
to	Address:	City/County/State/Zip:
to	Address:	City/County/State/Zip:
to	Address:	City/County/State/Zip:
to	Address:	City/County/State/Zip:

MILITARY

Military Service? Yes	No	If Yes, please attach a copy of your DD-214 discharge form and complete the following:
Branch:	Location:	
Date of entry/active service:	Date of separation:	
Type of discharge:	Reason for separation:	

CRIMINAL/CIVIL INFORMATION

NOTE: CONVICTIONS OR PENDING CRIMINAL CHARGES ARE NOT AN ABSOLUTE BAR TO EMPLOYMENT. THEY WILL BE CONSIDERED ONLY IF THERE IS A SUBSTANTIAL RELATIONSHIP TO THE CIRCUMSTANCES OF THE JOB FOR WHICH YOU ARE APPLYING.

For any "YES" response to the following questions, please attach a detailed written explanation. Submit certified copies of any criminal complaint and if convicted, a copy of the criminal judgment. In addition, submit any other relevant court documents pertinent to any of the questions raised.

- Have you ever been investigated for alleged misconduct in the course of any employment or as a member of any licensed or regulated profession? Yes No
- Have you ever resigned, been disciplined or dismissed from any teaching or other school position, in part, for alleged immoral conduct or incompetence? Yes No

"Immoral Conduct" means conduct or behavior that is contrary to commonly accepted moral or ethical standards and that endangers the health, safety, welfare or education of any pupil. Sec. 115.31(1)(c), Wis. Stats.
 "Incompetency" means substantial, prolonged patterns of inadequate performance of duties or the lack of ability, legal qualifications or fitness to discharge required duties, affecting the health, welfare, safety or education of pupils. PI 3.04(1)(b), Wis. Admin. Code.

- Have you ever had a certificate or license to teach or perform other school duties denied, revoked or suspended? Yes No
- Is disciplinary action of your educationally related license currently pending in any State? Yes No
- Have you ever been investigated for sexual conduct that resulted in a conviction or guilty adjudication for violating a civil law or local ordinance? Yes No
- Have you ever been convicted of any felony or misdemeanor criminal offense? Yes No
- Is any criminal charge currently pending against you in any State? Yes No
- Have you or a school district you were employed by ever been a party to a civil settlement, award or agreement of any kind that involved an allegation concerning your sexual conduct? Yes No

We will carefully review your previous experience to determine your qualifications for this position. Be specific in your responses. List present or most recent position first, then next recent, etc. (include all part-time jobs, military experience, and Marathon County employment).

PREVIOUS PAID EXPERIENCE

Employer's Name:				
Street:	City:	State:	Zip Code:	Phone Number:
Job Title:		Supervisor's Name and Title:		
Dates From: Mo/Yr	To	Total Time Worked: Years	Months	Hours Per Week:
Describe Duties:				
Reason for Leaving:			May we contact for a reference?	

Employer's Name:				
Street:	City:	State:	Zip Code:	Phone Number:
Job Title:		Supervisor's Name and Title:		
Dates From: Mo/Yr	To	Total Time Worked: Years	Months	Hours Per Week:
Describe Duties:				
Reason for Leaving:			May we contact for a reference?	

Employer's Name:				
Street:	City:	State:	Zip Code:	Phone Number:
Job Title:		Supervisor's Name and Title:		
Dates From: Mo/Yr	To	Total Time Worked: Years	Months	Hours Per Week:
Describe Duties:				
Reason for Leaving:			May we contact for a reference?	

Employer's Name:				
Street:	City:	State:	Zip Code:	Phone Number:
Job Title:		Supervisor's Name and Title:		
Dates From: Mo/Yr	To	Total Time Worked: Years	Months	Hours Per Week:
Describe Duties:				
Reason for Leaving:			May we contact for a reference?	

List any other employment not shown above on a separate sheet.

SKILLS

List all office machines or any other equipment related to the job you are applying for that you are skilled in operating (such as personal computer, computer software, dictating equipment, etc.):	
If applicable: Typing speed _____ wpm	Shorthand Speed _____ wpm
Do you possess a valid driver's license:	Yes License #
	No

Please list references (not relatives or employers) to contact who have knowledge of your qualifications.

REFERENCES

Name	Title/Occupation	Company/Address	Telephone #

Please include any information which you think would be helpful to us in considering you for employment, such as additional work experience, publications, training, activities, accomplishments, etc. Please specify length of time spent on these.
(Feel free to attach a resume.):

I hereby affirm that the information provided on this application, and accompanying documents, if any, is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered cause for dismissal if discovered at a later date.

Signature: _____ Date: _____

I have completed the attached Release of Information and Criminal Information Records

Check Form: _____ (Initials)

Thank you for your interest in Marathon School District
AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER