

# SCHOOL DISTRICT OF WESTON

## EMPLOYMENT APPLICATION

[AN EQUAL OPPORTUNITY EMPLOYER]

**PERSONAL INFORMATION**

DATE \_\_\_\_\_

NAME \_\_\_\_\_  
 LAST FIRST MIDDLE SOCIAL SECURITY NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_ WEB PAGE \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
 STREET CITY STATE ZIP

PERMANENT ADDRESS \_\_\_\_\_  
 STREET CITY STATE ZIP

PHONE NUMBER \_\_\_\_\_ ARE YOU 18 YEARS OR OLDER? YES  NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED  
 IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES  NO

**EMPLOYMENT DESIRED**

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

CERTIFIED STAFF ONLY: WISCONSIN LICENSE FILE # \_\_\_\_\_ OR EXPECTED ENDORSEMENTS: \_\_\_\_\_

ARE YOU EMPLOYED NOW? YES  NO  IF SO, MAY WE INQUIRE WITH YOUR PRESENT EMPLOYER? YES  NO

HAVE YOU APPLIED AT WESTON BEFORE? YES  NO  IF SO, WHAT DATE? \_\_\_\_\_ IF SO, WHAT POSITION? \_\_\_\_\_

**EDUCATION:** USE BLANKS FOR SCHOOLS OTHER THAN THOSE LISTED

EDUCATION	NAME AND LOCATION OF SCHOOL	DATES YOU ATTENDED	YEAR GRADUATED	DEGREE EARNED	MAJOR AREA	MINOR AREA
HIGH SCHOOL						
COLLEGE						
GRADUATE						

**REFERENCES:** PROVIDE THE NAMES OF THREE PERSONS, NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	PHONE	NATURE OF RELATIONSHIP	YEARS AQUAINTED

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**GENERAL**SPECIAL SKILLS: FOREIGN LANGUAGES, SPECIALIZATIONS, ATHLETIC EXPERIENCES, CLUBS, ORGANIATIONS, RESEARCH, ETC.  

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AWARDS, SCHOLARSHIPS, GRANTS, OR OTHER ACCOMPLISHMENTS  

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US MILITARY OR  
OTHER SPECIAL SERVICE \_\_\_\_\_

HIGHEST RANK \_\_\_\_\_

SEPARATION  
DATE \_\_\_\_\_  

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**FORMER EMPLOYERS:** [LIST THREE MOST CURRENT EMPLOYERS, MOST RECENT FIRST]

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
TO: FROM:				
TO: FROM:				
TO: FROM:				
TO: FROM:				

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HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES  NO ARE THERE ANY CHARGES CURRENTLY PENDING AGAINST YOU? YES  NO IF SO, PLEASE DESCRIBE THE CIRCUMSTANCES AND PROVIDE SPECIFIC DATE(S) ON A SEPARATE ATTACHED SHEET  

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DO YOU HAVE A DRIVER'S LICENSE? YES  NO 

DRIVER'S LICENCE NUMBER \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

HAVE YOU HAD ANY ACCIDENTS WITHIN THE LAST THREE YEARS? HOW MANY \_\_\_\_\_

HAVE YOU HAD ANY MOVING VIOLATIONS IN THE LAST THREE YEARS? HOW MANY? \_\_\_\_\_

I CERTIFY THAT ALL INFORMATION IN THIS APPLICATION IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS SHALL BE SUFFICIENT CAUSE FOR REMOVAL FROM CONSIDERATION FOR EMPLOYMENT OR FOR DISMISSAL AFTER EMPLOYMENT. I AUTHORIZE THE ADMINISTRATION OF THE SCHOOL DISTRICT OF WESTON, CAZENOVIA, WISCONSIN TO INVESTIGATE, WITHOUT LIABILITY, ALL STATEMENTS CONTAINED IN THIS APPLICATION AND HEREBY RELEASE SUCH PERSON, CORPORATION, OR OTHER ORGANIZATION FROM ANY AND ALL LIABILITY FOR PROVIDING SUCH INFORMATION.

I ALSO AUTHORIZE LISTED EMPLOYERS AND REFERENCES WITHOUT LIABILITY TO MAKE FULL RESPONSE TO ANY INQUIRIES BY THE ADMINISTRATION OF THIS INSTITUTION IN CONNECTION WITH THIS APPLICATION FOR EMPLOYMENT.

PRINTED NAME		DATE	
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**SIGNATURE**

THE SCHOOL DISTRICT OF WESTON IS AN EQUAL OPPORTUNITY EMPLOYER. THE SCHOOL DISTRICT OF WESTON DOES NOT DISCRIMINATE AGAINST INDIVIDUALS ON THE BASIS OF SEX, RACE, NATIONAL ORIGIN, ANCESTRY, CREED, RELIGION, PREGNANCY, MARITAL OR PARENTAL STATUS, SEXUAL ORIENTATION, OR PHYSICAL, MENTAL, EMOTIONAL, OR LEARNING DISABILITY OR HANDICAP. FEDERAL LAW PROHIBITS DISCRIMINATION IN EMPLOYMENT ON THE BASIS OF AGE, RACE, COLOR, NATIONAL ORIGIN, SEX, OR HANDICAP.

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