

**INDEPENDENT SCHOOL DISTRICT NO. 414  
APPLICATION FOR CLASSIFIED PERSONNEL POSITION**

**I. EQUAL EMPLOYMENT OPPORTUNITY**

Minneota Public School does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs and activities. The following people have been designated to handle inquiries regarding the non-discrimination policies: Scott Monson, Superintendent, 507-872-6532 EX 1134, [scott.monson@minneotaschools.org](mailto:scott.monson@minneotaschools.org) , Minneota Public Schools, ISD 414, 504 North Monroe Street, Minneota, MN 56264

**II. DATA PRIVACY NOTICE**

The information requested on this application may be used by the School District in determining suitability for employment for the position which you are currently seeking or may seek in the future. You are not legally required to provide any of the information on this form at this time. However, failure to provide complete, accurate information may result in the School District being unable or unwilling to offer employment to you. With respect to any special accommodations necessary for completing your application or the interview process, the School District may be unable to provide the necessary accommodations if you do not provide the requested information. The information on this application which is classified as private data under the Minnesota Government Data Practices Act will not be released outside the School District without your consent except as necessary for tax purposes or as otherwise required by state or federal law.

**III. POSITION DESIRED**

Title of position for which you are applying: \_\_\_\_\_  
Date Available to Begin Employment: \_\_\_\_\_  
Salary Range Desired: \_\_\_\_\_

**IV. PERSONAL DATA**

**NAME**

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

**ADDRESS**

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
Phone Number \_\_\_\_\_  
Email Address \_\_\_\_\_

Are you either a U.S. Citizen or legally eligible to hold employment in the United States?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you previously worked for Independent School District No. 414? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what was the position held? \_\_\_\_\_

If yes, under what name may your previous employment records be found? \_\_\_\_\_

Do you have any special needs which may necessitate accommodations in the application/interview process? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe the type of accommodations requested:

\_\_\_\_\_  
\_\_\_\_\_

List all other names under which you have been employed or under which your educational records may be found.

\_\_\_\_\_  
\_\_\_\_\_

**V. WORK EXPERIENCE**

**List *all* work experience, starting with the most recent**

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

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

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

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

*Attach additional sheets if necessary.*

**VI. LICENSURE**

List current licenses, registrations, or certificates relevant to the position for which you are applying.

<u>License/No.</u>	<u>Issued By</u>	<u>Date</u>	<u>Expiration</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**VII. EDUCATION**

Include high school and any education/courses taken, starting with the most recent.

Name of School: \_\_\_\_\_  
Address of School: \_\_\_\_\_  
Degree/Diploma Received: \_\_\_\_\_  
Major/Minor: \_\_\_\_\_  
Dates of Attendance: \_\_\_\_\_

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Name of School: \_\_\_\_\_  
Address of School: \_\_\_\_\_  
Degree/Diploma Received: \_\_\_\_\_  
Major/Minor: \_\_\_\_\_  
Dates of Attendance: \_\_\_\_\_

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Name of School: \_\_\_\_\_  
Address of School: \_\_\_\_\_  
Degree/Diploma Received: \_\_\_\_\_  
Major/Minor: \_\_\_\_\_  
Dates of Attendance: \_\_\_\_\_

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Name of School: \_\_\_\_\_  
Address of School: \_\_\_\_\_  
Degree/Diploma Received: \_\_\_\_\_  
Major/Minor: \_\_\_\_\_  
Dates of Attendance: \_\_\_\_\_

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Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

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

List/Describe any other training and/or experience relevant to the position for which you are applying: \_\_\_\_\_  
\_\_\_\_\_

**VIII. REFERENCES:**

These should be people in a position to discuss your qualifications for the position you seek. Include especially managers, directors, or heads of departments under whom you have worked. Indicate any who are related to you. The School District reserves the right to contact all prior employers, educational institutions, or institutions where you have volunteered in addition to references listed below.

Name of Reference: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

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

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Name of Reference: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

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

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Name of Reference: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

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

**IX. VETERAN STATUS**

Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veteran Preference Points? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you wish to claim Veteran Preference Points (if applicable)? Yes \_\_\_\_\_ No \_\_\_\_\_

If you are a disabled veteran and wish to claim additional points, please check here: \_\_\_\_\_

**X. PRIOR EMPLOYMENT**

Have you ever been discharged or forced to resign from employment or resigned as part of a settlement agreement with an employer? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, describe the circumstances: \_\_\_\_\_

\_\_\_\_\_

**XI. PERSONAL STATEMENT**

Please indicate why you are interested in the position and what you hope to accomplish if selected. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**XII. CERTIFICATION, ACKNOWLEDGEMENT, AND RELEASE**

I certify that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the District.

I understand, acknowledge, and agree that no offer of employment is valid or binding until formal approval by the School Board and that until such approval that the School District shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application I hereby authorize any and all former employers, organizations where I have volunteered and references named in this application, or any agent of such former employer or volunteer organizations, to release to Independent School District No. 414 and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment related information, both public and private, in their possession. I understand that Independent School District No. 414 will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature below.

I hereby release Independent School District No. 414 and all former employers, volunteer organizations, and references listed herein and all agents acting on behalf of said District, former employers, volunteer organizations, or references, for any and all liability whatever nature by reason of requesting or providing such information.

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

(Do Not Print)