

Application For Employment

Westbrook Walnut Grove Public School ISD #2898
 344 8th Street, PO Box 129 - Westbrook, MN 56183
 WWG Schools - 507-274-6111

Name:			
	First	Last	Middle

Address:				
	Street	City	State	Zip Code

Phone #	Email Address

Are you 18 years or older?	Yes		No	
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Are you a Veteran?	Yes		No	
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Are you the spouse of a deceased or disabled Veteran?	Yes		No	
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Position(s) Applied For		Starting Salary Expected	\$
Are you presently employed?		If so, may we inquire of your present employer?	
May we contact you at work?		Work Telephone #	

Education	Years Completed	Diploma/Degree	Grade Average	Subjects Studied
Name/Location of School High School/College/Trade/Military				

Have you ever been convicted of any crime other than a minor traffic violation?	Yes	No
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If yes, what is the disposition of the case?	
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**Conviction of a crime is NOT an automatic bar to employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

Special Qualifications (list below) (licenses, languages, machine operation, etc.):

What other education or training have you had that might relate to the position you are applying for?

Employment History: List complete employment history. Start with your present or most recent position first, then list the positions prior to that, etc. You do not need to provide dates of employment or jobs held more than 5 years ago.

Employer Name/Address		Position	
Description of Duties			
Dates of Employment			
Immediate Supervisor		Phone #	
	Ok to contact this employer?		

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Description of Duties			
Dates of Employment			
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Description of Duties			

Dates of Employment			
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Employer Name/Address		Position	
Description of Duties			
Dates of Employment			
Immediate Supervisor		Phone #	
	Ok to contact this employer?		

References: Give the names of three persons not related to you, whom you have known at least one year.

	Name	Address	Phone	Years Acquainted
1				
2				
3				

"I certify that the facts contained in this application form are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information then may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice."

Signature: _____ Date: _____

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 District #2898.

I understand, acknowledge and agree that no offer of employment is valid or binding until formal approval by the School Board or the appointing authority referenced in the job description and that until such approval that District #2898 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 current and former employers, organizations where I have volunteered, references named in this application, and any agent of a former employer or volunteer organization to release to District #2898 and its agents any and all information regarding my job performance, fitness/qualifications to perform the position I am presently seeking and any other employment or related information both public and private, in their possession. I understand that District #2898 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 District #2898 and all former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said District, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.

Signature: _____ Date: _____