## INDEPENDENT SCHOOL DISTRICT 2890

## DISTRICT ADMINISTRATIVE OFFICE

Phone: 320-329-8362 301 Northeast Third Street Renville, MN 56284 Fax: 320-329-3271

"An Equal Employment Opportunity Employer"

You may use your resume to supp	element this	application, however, p	lease complete the entire	re application	1.
POSITION APPLYING FOR					
NAME			D	ATE	
ADDRESS		CITY	S	TATE	ZIP
PHONE NUMBER (HOME)			(CELL)		
E-MAIL ADDRESS			_		
DATE AVAILABLE FOR EMPL	OYMENT				
Can you, after employment, subm	it verification	on of your legal right to	work in the United Star	es? YES	NO
ARMED FORCES: YES _	1	NO BRAN	NCH		
Date of Discharge		Rank	at Discharge		
If you are selected to interview fo Circle the special skills you have:					nts.
EDUCATION					
SCHOOL		ADDRESS	COURSE OF ST	TUDY	YEARS COMPLETED
REFERENCES (Excluding relat	ives)				
NAME AND JOB TITLE		ADDRESS		PHONE NUMBER	
				l	

EMPLOYMENT (Starting with Present or Most Recent Employer)	
Employer Name	
Address	Dates Employed
Name of Supervisor	<u> </u>
Job Title	Reason for Leaving
EMPLOYMENT	
Employer Name	Telephone
Address	
Name of Supervisor	
Job Title	
EMDLOVIMENT	
EMPLOYMENT  Employer Name	
Employer Name	
Name of Supervisor	
Job Title	
Have you ever been involuntarily discharged or fired?	
Please explain:	
2. In your previous work, what did you enjoy the most?	
3. How do you prepare for a day's work?	
4. Which is more important to you; to have a good supervisor or to have goo	d nay and henefits?
Please describe for us an excellent employee.	
6. Why do you want to work for Independent School District 2890?	

## EQUAL EMPLOYMENT OPPORTUNITY, REASONABLE ACCOMMODATION AND VETERAN'S PREFERENCE

Independent School District 2890's policy is to provide equal employment opportunity for all applicants and employees. Indep School District 2890 does not unlawfully discriminate on the basis of race, color, creed, religion, national origin, sex, marital st veteran status, sexual orientation, age or disability.	
Are you able to perform the duties of the position for which you are applying, including regular attendance, with or without a reaccommodation? YES NO	easonable
If you are a veteran or a spouse of a deceased or disabled veteran and wish to claim veteran's preference, you must present a leaphtotocopy of your DD214 to the Personnel Office. If your claim is approved, preference points will be applied to applicable la	
CONSENT TO RELEASE OF INFORMATION	
I request, authorize and consent to the release of information to Independent School District 2890, Renville, MN (ISD 2890) re my previous employment and authorize all past employers or agent they may designate, to respond to verbal or written inquirie Independent School District 2890, regarding my employment record. I further request, authorize and consent to Independent S District 2890 contacting the personal references identified in my application through verbal or written inquiries for purposes of confirming information contained in my application for employment as well as reliability, honesty, and potential tendency, if at engage in any form of violence or other harmful, unsafe or threatening behavior. Finally, I request, authorize and consent to the and disclosure of educational records from any and all public or private educational institutions that I have attended and to release information from any public agency or private entity concerning any professional or vocational license or certification that I has the past, or currently hold, to Independent School District 2890.	s from chool ny, to e release ase
CERTIFICATION	
I have answered all questions to the best of my knowledge. I certify that the facts set forth in the above employment applicatio and complete to the best of my knowledge. I understand that if I am employed, any false statement, misrepresentation, or omis facts on this application or on any supporting documents such as the Child Support Disclosure Form and the Employment Eligi Verification (Form I-9), regardless of when discovered to be false, misrepresented or omitted, shall be considered sufficient cardismissal.	sion of bility
CRIMINAL HISTORY BACKGROUND CHECK	
<b>IF EMPLOYED BY THIS DISTRICT</b> , I authorize the Minnesota Bureau of Criminal Apprehension to disclose criminal hist information to Independent School District 2890 pursuant to Minnesota Statute 123B.03 for the purpose of employment. I und that my employment with Independent School District 2890 is conditional pending completion of the background check. I further understand that I may be terminated based upon the results of the background check.	erstand
I agree to provide a check payable to the <i>Minnesota Bureau of Criminal Apprehension</i> in the amount of \$15.00 to pay the fee for conducting the criminal history background check if offered employment.	or
NAMEDATE_	

Revised: 1-3-2024