

School District of Denmark

**450 N. Wall Street
Denmark, WI 54208
Phone: 920-863-4000
www.denmark.k12.wi.us**

Application for Employment: Support Staff

Position Applied For: _____ **Date of Application:** _____

Last Name: _____ **First Name:** _____ **Middle Initial:** _____

Address: _____

Telephone- Home: _____ **Work:** _____ **Cell:** _____

Have you previously filed an application with the School District of Denmark? Yes___ (date: _____) No___

Have you previously been employed by the School District of Denmark? Yes___ (date: _____) No___

Are you currently employed? Yes___ No___

Are you currently prevented from lawful employment in this country (proof of US citizenship or immigration status will be required upon employment)? Yes___ No___

Date available to begin employment in the School District of Denmark: _____

Are you currently on ðlay-off employment status and subject to recall? Yes___ No___

Have you been convicted of any crimes or any ordinance violations such as traffic citations in the past seven (7) years: Yes___ No___ If yes, identify the date(s) of conviction and circumstances which led to the conviction (please note, a ðyesö response is not an automatic ban from employment. The district will evaluate whether the circumstances of the conviction are substantially related to the position you are applying for)

Education History

<u>School Level</u>	<u>Name of Institution</u>	<u>Course of Study</u>	<u>Degree</u>	<u>Cum. GPA</u>
College				
Other Training Program				
High School				

Employment Experience (most recent first)

Employer: _____ Dates Employed: _____
Address: _____ Phone Number: _____
Job Title: _____ Supervisor: _____
Hours worked per week at this position: _____ Hourly rate earned at this position: _____
Reason for Leaving: _____

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Address: _____ Phone Number: _____
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Employer: _____ Dates Employed: _____
Address: _____ Phone Number: _____
Job Title: _____ Supervisor: _____
Hours worked per week at this position: _____ Hourly rate earned at this position: _____
Reason for Leaving: _____

The School District of Denmark considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status

Application Certification & Authorization

I certify the information provided on this employment application is true and complete to the best of my knowledge.

I authorize the School District of Denmark to investigate my responses on this application and contact any or all of my former employers or any other individuals familiar with my employment background or me for the purposes of verifying any information I have provided and / or for obtaining any information, either favorable or unfavorable about me for my employment. I voluntarily and knowingly fully release and hold harmless any person or organization who provides information pertaining to my employment history or me.

Any offer for employment is subject to approval or rejection of the Board of Education for the School District of Denmark. In the event of employment, I understand false or misleading information and/or material omissions in my application or interview(s) may result in denial of employment or discharge when discovered. Additionally, I understand I am required to abide by all rules and regulations of the School District of Denmark.

This application for employment shall be considered active for a period of time not to exceed 45 days from the date of receipt. Any applicant wishing to be considered for employment beyond this time period should resubmit an application for that vacant position.

Applicant Signature

Date

How did you learn of this position vacancy?

- Advertisement: Denmark Press
- Advertisement: Green Bay Press Gazette
- Other: _____

School District of Denmark

Criminal Record Inquiry Information

This page is to be separated from application upon receipt and retained by Human Resources separately from personnel records.

1. The following information is required of applicants and requested solely to enable the School District of Denmark to make inquiries to appropriate government officials regarding possible criminal records. Any criminal record information obtained by the school district will be used only in accordance with applicable law.

Full name: _____
Last
First
Middle

Previously Used Name(s): _____

Gender: Male _____ Female _____

Race: White (not of Hispanic origin) _____ Hispanic Asian _____

African-American (not of Hispanic origin) _____ Native American _____ Other (specify) _____

Date of Birth: _____ Place of Birth (city / state): _____

Driver's License Number: _____

1.	Have you ever been convicted of an offense other than a minor traffic violation? (DUI and DWI convictions are not minor and must be reported.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Have you ever been arrested for a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Have you ever been charged with a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Have you ever been arrested (even if no contest or charges dropped or pled down) for a sex-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Have you ever been charged (even if no contest or charges dropped or pled down) for a sex-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Have you ever been convicted (even if no contest or charges dropped or pled down) for a sex-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Have you ever been arrested (even if no contest or charges dropped or pled down) for a drug-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Have you ever been charged (even if no contest or charges dropped or pled down) for a drug-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	Have you ever been convicted (even if no contest or charges dropped or pled down) for a drug-related offense?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	Have you ever been arrested for an act of violence, including domestic violence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
12.	Have you ever been charged for an act of violence, including domestic violence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.	Have you ever been convicted for an act of violence, including domestic violence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
14.	Has your professional license ever been revoked?	<input type="checkbox"/> Yes <input type="checkbox"/> No
15.	Have you ever been discharged or separated from a position with a school district or been asked to resign a licensed arrangement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
16.	Have you ever been the subject of an investigation by a school district or any other employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
17.	Have you ever had sanctions placed on your teaching certificate for any reason?	<input type="checkbox"/> Yes <input type="checkbox"/> No
18.	Have you ever been denied a teaching certificate anywhere?	<input type="checkbox"/> Yes <input type="checkbox"/> No
19.	Is disciplinary action currently pending anywhere against your certificate?	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. If yes to any of the questions, please complete information below (Note: Information provided in response to this question does not constitute an automatic bar to employment. The circumstances of each case will be evaluated in accordance with §111.355, Wis. Stats.)

Date	Charge	Place	Court / Tribunal	Action / Outcome

The above information is true and complete to the best of my knowledge. I hereby authorize the District to conduct a criminal or record check or other background investigation and will cooperate with the District's representative agent in this process.

Signature _____ Date: _____