

# PALMYRA-EAGLE AREA SCHOOL DISTRICT

123 BURR OAK STREET • P.O. BOX 901 • PALMYRA, WI 53156 • TELEPHONE 262-495-7101

EMPLOYMENT APPLICATION			
<b>PERSONAL INFORMATION</b>			
NAME:	FIRST:	MIDDLE INITIAL:	LAST:
PRESENT ADDRESS:			P.O. BOX:
CITY:			STATE:      ZIP:
PHONE:	Home: (      )	Other: (      )	
SOCIAL SECURITY NO.:			
Are you 18 years or older? Yes <input type="checkbox"/> No <input type="checkbox"/> Are you a U.S. Citizen or otherwise currently authorized to obtain lawful employment in this country? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Driver's License #:			STATE:
COMMERCIAL D.L.#:			STATE:
Have you ever pleaded guilty to or been convicted of a misdemeanor or felony? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, provide further information as to the date, location of court, nature of the offense, and so forth. If the job you are applying for requires you to operate a motor vehicle, include traffic convictions. (The Palmyra-Eagle Area School District will consider your record only as it may substantially relate to the job for which you are applying.)			
<b>PLEASE INDICATE WHICH TYPE(S) OF EMPLOYMENT INTERESTS YOU: (Check more than one block if you wish)</b>			
<input type="checkbox"/> Custodial <input type="checkbox"/> Food Service <input type="checkbox"/> Clerical <input type="checkbox"/> Aide <input type="checkbox"/> Full-Time <input type="checkbox"/> Part Time <input type="checkbox"/> Evenings			
<b>ARE YOU PRESENTLY EMPLOYED?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>DATE AVAILABLE</b>		<b>SALARY EXPECTATION</b>
List relatives or friends employed by us:			
<b>EDUCATIONAL INFORMATION</b>	Name, Address, City & State		Did you graduate?
High School			Yes <input type="checkbox"/> No <input type="checkbox"/>
College	Major:		Yes <input type="checkbox"/> No <input type="checkbox"/>
(Information about your education will be used only where relevant and to assist in determining what positions might be appropriate for consideration.)			
<b>SKILLS OR ADDITIONAL TRAINING</b>			
<b>PREVIOUS EMPLOYERS (Please list all previous employers, beginning with your most recent employer. Attach additional sheets if necessary.)</b>			
COMPANY NAME:			DATES:
ADDRESS:			REASON FOR LEAVING:
CITY:	STATE:	ZIP:	PHONE:
SUPERVISOR:	POSITION HELD:		SALARY:
COMPANY NAME:			DATES:
ADDRESS:			REASON FOR LEAVING:
CITY:	STATE:	ZIP:	PHONE:
SUPERVISOR:	POSITION HELD:		SALARY:

PERSONAL REFERENCES (Please list persons who are <u>not</u> related to you or personal friends.)			
1.	NAME:		PHONE: (      )
	ADDRESS:		P.O. BOX:
	CITY:		STATE:      ZIP:
2.	NAME:		PHONE: (      )
	ADDRESS:		P.O. BOX:
	CITY:		STATE:      ZIP:
3.	NAME:		PHONE: (      )
	ADDRESS:		P.O. BOX:
	CITY:		STATE:      ZIP:

**AUTHORIZATION, RELEASE, AND CERTIFICATION**

I certify that all information on this application is true, complete, and correct to the best of my knowledge. I understand that any false or misleading statements by me, or material omissions of information requested of me, may result in rejection of my application or, if employed, my immediate dismissal.

I hereby give permission to the employer to seek to verify and supplement the information set forth in the application. I release from all liability or legal claims every person seeking or providing information, whether oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

I understand and agree that, if hired, I may voluntarily leave employment at any time with two weeks advance written notice to the Palmyra-Eagle Area School District. I further understand and agree that the District retains the right to suspend, demote, discharge or take such action as it deems necessary regarding an employee. Should the District desire to terminate an employee, two weeks advance notice shall be given in writing to the employee.

I understand this application will be considered inactive after sixty (60) days.

I certify I have read (or have had read to me) and understand this authorization, release, and certification.

Dated: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

The Palmyra-Eagle Area School District is an equal opportunity employer and does not discriminate on the basis of race, national origin, religion, age, sex, handicap or disability or other basis prohibited by applicable local, state or federal fair employment laws or regulations. Applicants with a disability may request accommodations needed in the application and/or interview process.

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EMPLOYMENT RECORD			
ADDENDUM TO EMPLOYMENT APPLICATION OF _____			
COMPANY NAME:		DATES:	
ADDRESS:		REASON FOR LEAVING:	
CITY:	STATE:	ZIP:	PHONE:
SUPERVISOR:	POSITION HELD:		SALARY:
COMPANY NAME:		DATES:	
ADDRESS:		REASON FOR LEAVING:	
CITY:	STATE:	ZIP:	PHONE:
SUPERVISOR:	POSITION HELD:		SALARY:
COMPANY NAME:		DATES:	
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CITY:	STATE:	ZIP:	PHONE:
SUPERVISOR:	POSITION HELD:		SALARY: