

## **EMPLOYMENT APPLICATION**

Name:					Date:		
Address:	'ess:				Primary Phone #:		
City:	State:		Zip: S	Social Security Number:			
Position(s) Applying For:				🗆 Full-Time	Substitute/Part-Time		
Date Available to Start:			Email Address:				
Are you under the age of 18?	□ Yes	□ No	If yes, date of birth:				
Have you ever worked for Our System?	🗆 Yes	□ No	If yes, give dates:				
Name during previous employment (if different):			Reason for Leaving:				

If you are applying for a position which requires you to drive an automobile as part of your job, please provide your driver's license number and state of issue: (Please provide a copy of Drivers' License-Front and Back)

Number:	State of Issue:

#### EDUCATION

Type of School	Name of School and Complete Mailing Address	Comp	oleted	Major or Degree
High School		□ YES	□ NO	
College or Trade School		□ YES	□ NO	
Professional School		□ YES		
Other Training		□ YES	□ NO	

Please list any academic honors you have received which you believe relate to the position you are applying for:

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Name of Employer:	Start Date:
Name of Supervisor:	Find Date:
Complete Address:	
Last Job Title:	
Phone Number:	
Reason for Leaving (Be Specific):	
May we contact this employer?	
List the jobs you held, duties performed, skills used or learn	ed, advancements, or promotions while you worked at this company:
Name of Employer:	Start Date:
Name of Supervisor:	End Date:
Complete Address:	Start Salary:
Last Job Title:	End Salary:
Phone Number:	
Reason for Leaving (Be Specific):	
May we contact this employer?	
List the jobs you held, duties performed, skills used or learn	
	ed, advancements, or promotions while you worked at this company:
	ed, advancements, or promotions while you worked at this company:
Name of Employer:	Start Date:
Name of Employer: Name of Supervisor:	Start Date:
Name of Commission	Start Date: End Date:
Name of Supervisor:	Start Date: End Date: Start Salary:
Name of Supervisor: Complete Address:	Start Date: End Date: Start Salary: End Salary:
Name of Supervisor: Complete Address: Last Job Title: Phone Number:	Start Date: End Date: Start Salary: End Salary:
Name of Supervisor: Complete Address: Last Job Title:	Start Date: End Date: Start Salary: End Salary:
Name of Supervisor: Complete Address: Last Job Title: Phone Number: Reason for Leaving (Be Specific): May we contact this employer?	Start Date: End Date: Start Salary: End Salary:
Name of Supervisor: Complete Address: Last Job Title: Phone Number: Reason for Leaving (Be Specific): May we contact this employer?	Start Date: End Date: Start Salary: End Salary:
Name of Supervisor: Complete Address: Last Job Title: Phone Number: Reason for Leaving (Be Specific): May we contact this employer?	Start Date: End Date: Start Salary: End Salary:

All Applicants – please list any additional experiences, skills, and qualifications which you believe relate to the job(s) for which you are applying:

#### **REFERENCES:**

Please list at least 3 references, other than relatives and previous employers, whom you have known for at least 1 year:

Name:	Name:	
Position:	Position:	
Company:	Company:	
Telephone:	Telephone:	
Email:	Email:	
_		
Name:	Name:	
Position:	Position:	
Company:	Company:	
Telephone:	Telephone:	
Email:	Email:	

## READ, UNDERSTAND, SIGN AND DATE IF YOU AGREE

I hereby certify that all statements made in this application are true and complete to the best of my knowledge and authorize investigation of all statements herein recorded. I understand that any false statements or omissions of fact may subject me to disqualification or dismissal if discovered after employment. I understand I am required to furnish information and references to use in determining my qualifications. I understand that the District may conduct an investigation of my work and/or personal history and that it may verify all data given in my application for employment, related papers, and/or oral interviews. I further understand that any and all references that I have provided to the District, either in writing or otherwise, may be contacted. I understand that my fingerprints will be used to check the criminal history records of the FBI. I understand that I have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction or updating an FBI identification record is set forth in Title 28 Code of Federal Regulations 16.34. Procedures for obtaining a copy of the FBI criminal history record are set forth in 28 CFR 16.30-16.33 or go to FBI website at <a href="http://fbi.gov/about-us/cjis/background-checks">http://fbi.gov/about-us/cjis/background-checks</a>.

My signature below authorizes Dodge County Board of Education to conduct a background investigation and authorizes the release of information in connection with my application for employment. I authorize any previous employer and/or any other reference to release and fully disclose to any agent of the District any information such person may have concerning me, including information of a confidential or privileged nature, whether or not it is in their records. Further, I hold harmless any individual or employment agency for any information that he/she/it may provide in this investigation. I waive my right of access to any such information and without limitation hereby release Dodge County Board of Education and the reference source from any liability in connection with its **release** or use. A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain my original signature.

Applicant Name (Please Print)

**Applicant Signature** 

Date

## **CONVICTION REPORT**

### All applicants must complete this form.

### This information will be kept confidential and separate from your application.

#### **Conviction Background**

As part of the application process, you are required to report any and all convictions or current charges for a crime, no matter when they may have occurred. A conviction will not automatically prevent you from being considered for hire – <u>falsification</u> <u>of your application</u>, <u>by not reporting or inaccurately reporting, will prevent you from being considered for any employment in Dodge County Board of Education.</u>

Have you ever been convicted of or have a current charge pending of any violation of the law?  $\Box$  Yes  $\Box$  No

If yes, list the violation code number for each offense, including those for which you forfeited bail, were fined and/or jailed, or placed on probation. Include a complete and accurate explanation of the circumstance (you may submit an additional page if you need more space than provided below).

Violation Code	Date	
Disposition/Explanation:		
Violation Code	Date	
Disposition/Explanation:		
Violation Code	Date	

Disposition/Explanation:

I certify that I have listed all my convictions and any current charges, except minor traffic offenses. I understand that my failure to complete this form, any omission of convictions and current charges, or misrepresentation of material facts will result in disqualification, or if discovered after employment, my dismissal from Dodge County Board of Education.

Applicant Name (Please Print)

**Applicant Signature** 

Date