

School District of Auburndale  
10564 School Avenue, P.O. Box 139  
Auburndale, WI 54412-0139  
Website: aubschools.com

715-652-2117 (Fax: 715-652-2836)

**APPLICATION FOR EMPLOYMENT**

*The School District of Auburndale does not discriminate in employment on the basis of race, religion, national origin, sex, age, marital status, disability, sexual orientation, arrest or conviction record, or any other legally protected status.*

Date: \_\_\_\_\_

Position for Which You Are Applying: \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last

Present Address \_\_\_\_\_  
Street City State, Zip

Telephone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

(Cell) \_\_\_\_\_

*(All offers of employment are conditional based upon proof of eligibility to work in this country, successful background check, criminal records check, appropriate certification, passing of physical and other conditions that may be required.)*

**EDUCATION:**

Include high school and/or institution issuing GED and any additional education/courses taken. Do not list dates of attendance for high school. List most recent first.

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

**LICENSURE:**

List current licenses, registration or certificates relevant to the position for which you are applying.

License Number	Issued By	Date	Expiration
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**WORK/VOLUNTEER EXPERIENCE:**

List all work and volunteer experience, most recent to be listed first.

Employer Name \_\_\_\_\_  
Employer Address \_\_\_\_\_  
Job Title \_\_\_\_\_  
Job Duties \_\_\_\_\_  
Dates of Employment (mm/dd/yyyy) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Employer Name \_\_\_\_\_  
Employer Address \_\_\_\_\_  
Job Title \_\_\_\_\_  
Job Duties \_\_\_\_\_  
Dates of Employment (mm/dd/yyyy) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

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Employer Name \_\_\_\_\_  
Employer Address \_\_\_\_\_  
Job Title \_\_\_\_\_  
Job Duties \_\_\_\_\_  
Dates of Employment (mm/dd/yyyy) \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**BACKGROUND INFORMATION:**

Are you currently employed? .....  Yes  No  
Is your current employer aware of your application for another job? ..  Yes  No  N/A

Have you ever been discharged, forced to resign from employment or resign as part of a settlement agreement with an employer other than one involving a human rights charge or claim in which you | were the claimant/plaintiff? .....  Yes  No  N/A  
If yes, please provide an explanation below:  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? .....  Yes  No  
If yes, please provide an explanation below:  
\_\_\_\_\_  
\_\_\_\_\_

(A conviction will not be an automatic bar to employment and will be considered only as it relates to the job being applied for)

Have you ever paid a civil forfeiture or fine for a non-traffic related offense (including municipal court violations)? .....  Yes  No  
If yes, please provide an explanation below:  
\_\_\_\_\_  
\_\_\_\_\_

(Payment of a fine will not be an automatic bar to employment and will be considered only as it relates to the job being applied for)

Do you have any charge(s) pending against you? .....  Yes  No  
If yes, please provide an explanation below:  
\_\_\_\_\_  
\_\_\_\_\_

(A pending charge will not be an automatic bar to employment and will be considered only as it relates to the job being applied for)

**AUTHORIZATION:**

I authorize investigation of all statements contained in this application or made by me during the hiring process. I understand that misrepresentation or omission of facts called for is cause for dismissal. The School District of Auburndale and its employees shall not be held liable if I am denied employment, if it is verified that I provided false statements and/or omitted substantive information.

Dated: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

I voluntarily grant the School District of Auburndale the right to investigate statements I have made in this application, as well as other job-related information, activities and references. I also authorize any current or former employer, person, firm, corporation, school or government agency to disclose to the School District of Auburndale any information that they may have regarding me. I release the School District of Auburndale, and providers of information, from liability and for any damages which may result from the furnishing of this information.

Dated: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

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**BACKGROUND CHECK**

All applicants who desire to be seriously considered for a position with the School District of Auburndale must consent to having a thorough background and reference check. Each question must be answered accurately by circling "Yes" or "No"; when a "yes" is circled an explanation should be included detailing dates and other significant information. "Yes" answers will not be an automatic bar to employment and will be considered only as it relates to the job being applied for.

- Yes No 1. Have you ever had a license suspended, revoked or has any other action been taken with respect to your license, either in Wisconsin or any other state?
- Yes No 2. Have you ever resigned, been disciplined, or dismissed from any teaching, other school position, or any other position (paid or unpaid) involving children, in part, for alleged immoral conduct\* or incompetence\*\*?
- Yes No 3. Is disciplinary action of your educationally related certificate or license currently pending in any state?
- Yes No 4. Have you ever been investigated for sexual conduct, abuse, or neglect that resulted in any legal action up to and including conviction, or guilty adjudication for violating a civil law or a local ordinance?
- Yes No 5. Have you ever been convicted of any felony or misdemeanor criminal offense?
- Yes No 6. Have you ever participated in a deferred prosecution program resulting from a criminal investigation?
- Yes No 7. Have you ever been acquitted or found not guilty of a criminal offense involving sexual conduct, harm or threat of harm to another, for reasons of insanity, mental disease or defect, diminished mental capacity or comparable legal defense or basis?
- Yes No 8. Is any criminal charge pending against you in any state?
- Yes No 9. Have you or a school district you were employed by ever been party to a civil settlement, award, or agreement of any kind that involved allegation concerning your sexual, physical, or emotional conduct?

\* "Immoral Conduct" means conduct or behavior that is contrary to commonly accepted moral or ethical standards and that endangers the health, safety, welfare or education of any child.

\*\* "Incompetency" means substantial, prolonged patterns of inadequate performance of duties or the lack of ability, legal qualifications or fitness to discharge required duties, affecting the health, welfare, safety or education of pupils or children.

For any "Yes" response, provide a detailed written explanation on this or other sheet of paper.

I HEREBY AFFIRM that all information on and with this application is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of facts may result in denial (or termination) of employment.

I HEREBY AUTHORIZE any of my previous employers, law enforcement agencies, any public agency holding criminal background information, the Wisconsin Department of Public Instruction (including its Licensing office), and the courts to release information which pertains to my responses to the questions listed above, or any inquiry related to background and reference checks conducted as a result of this job application. I hold the School District of Auburndale harmless in its search for background information, as well as any provider of such information.

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Telephone Number (        ) \_\_\_\_\_

Signature \_\_\_\_\_ Date Signed \_\_\_\_\_