



# School District of Tigerton

213 Spaulding Street

Tigerton, WI 54486

Telephone: (715) 535-4000 Fax: (715) 535-3215

Website: [www.tigerton.k12.wi.us](http://www.tigerton.k12.wi.us)

## Certified Staff Employment Application

Date of Application: \_\_\_\_\_

FOR OFFICE USE ONLY		USE ONLY Distribution:	
<input type="checkbox"/> W-4		<input type="checkbox"/> TES	
<input type="checkbox"/> I-9		<input type="checkbox"/> THS	
<input type="checkbox"/> License		<input type="checkbox"/> District Office	
<input type="checkbox"/> Background Check			
<input type="checkbox"/> Physical			

### PERSONAL DATA

LAST NAME	FIRST	MIDDLE	
STREET ADDRESS	CITY	STATE	ZIP
DAYTIME PHONE	HOME PHONE	SOCIAL SECURITY NO.	

### POSITION(S) DESIRED

**PLEASE NOTE: THE TIGERTON SCHOOL DISTRICT DOES NOT ACCEPT GENERAL APPLICATIONS. YOU MUST APPLY FOR A SPECIFIC POSITION WHEN OPEN. APPLICATIONS FOR SUBSTITUTE POSITIONS ARE ALWAYS WELCOME.**

Which position are you applying for? \_\_\_\_\_

### CONTRACT STATUS

Are you currently under contract?  Yes  No

If yes, please provide the name, address, and phone number of your supervisor, and identify the position you hold.

\_\_\_\_\_

### EDUCATION AND TRAINING (Please list the colleges and universities attended. Most recent first.)

NAME OF SCHOOL, CITY, STATE	DATES ATTENDED FROM-TO	DEGREE MAJOR/MINOR	GPA

Number of Graduate Credits beyond Bachelor's Degree: \_\_\_\_\_

Number of Graduate credits beyond Master's Degree: \_\_\_\_\_

### RELEVANT COLLEGE, RECREATIONAL AND COMMUNITY ACTIVITIES

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EDUCATOR'S LICENSE(S)/PERMIT(S)

POSITION CODE	SUBJECT CODE	SUBJECT AND GRADE(S)	LICENSE EXPIRATION	STATE, IF NOT WI

### PROFESSIONAL EXPERIENCE

Please provide the following information of your last four (4) employers, assignments or volunteer activities, starting with the most recent.

FROM	TO	EMPLOYER	TELEPHONE NO.
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR		SUMMARIZE THE NATURE OF THE WORK PERFORMED & RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE _____ Yes _____ No			
REASON FOR LEAVING		HOURLY RATE/SALARY START                      PER                      FINAL                      PER	

FROM	TO	EMPLOYER	TELEPHONE NO.
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR		SUMMARIZE THE NATURE OF THE WORK PERFORMED & RESPONSIBILITIES	
MAY WE CONTACT FOR REFERENCE _____ Yes _____ No			
REASON FOR LEAVING		HOURLY RATE/SALARY START                      PER                      FINAL                      PER	

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MAY WE CONTACT FOR REFERENCE _____ Yes _____ No			
REASON FOR LEAVING		HOURLY RATE/SALARY START                      PER                      FINAL                      PER	



**READ AND SIGN**

Do you have a valid Wisconsin driver's license?  Yes  No

Have you ever been convicted of a misdemeanor other than a minor traffic offense?  Yes  No

If yes, please explain: \_\_\_\_\_

Note: A criminal record does not constitute a bar to employment, unless it is substantially related to the job in question.  
If the job for which you are applying requires that you operate a motor vehicle, include traffic convictions.

Is there any additional information regarding your name, necessary for us to conduct a record check?  Yes  No

If yes, please explain: \_\_\_\_\_

My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, medical records and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and the reference source from any liability in connection with its release or use.

I understand that the school district is committed to maintaining a drug-free workplace. I am aware that the school district may require a drug test as part of the hiring process or during employment. I understand that possession of illegal or illicit substances shall be grounds for failure to employ or for my discharge should I become employed by the school district.

If employed, I agree to comply with all the rules and regulations of the Tigerton School District. I also understand that employment is subject to satisfactory investigation of this application and a favorable physical examination report, including a chest x-ray or tuberculin test. A physical examination will be performed only after an offer of employment has been made. Further, a job offer will not be withdrawn based on the results of the physical examination unless the examination reveals a job-related reason why the applicant may not be hired by the Tigerton School District.

Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, or false statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The Tigerton School District shall not discriminate on the basis of race, religion, creed, political affiliation, physical, mental, emotional, learning, or other disabilities, sex, sexual orientation, age, national origin, citizenship, marital or parental status, ancestry, color, arrest or conviction record, membership in the National Guard, state defense force or any other reserve component of the military forces of the United States or Wisconsin, or any other reason prohibited by state or federal law.*