RICHLAND SCHOOL DISTRICT 1996 US Highway 14 West Richland Center, WI 53581

APPLICATION FOR AIDES/CLERICAL/FOOD SERVICE AND CUSTODIAL/MAINTENANCE POSITIONS

Return completed application to the address above, attention Amber Bingham, or submit electronically to bina@richland.k12.wi.us.

POSITION APPLYING	FOR:	
PERSONAL INFORMA	ATION	
Name		Date
Address	City	Zip
Telephone	Alternate PhoneE-Mail Ad	ldress
Social Security Number _	Drivers License Number (O	ptional)
Have you ever been conv	victed of a felony?NoYes If Yes,	explain
EDUCATIONAL BACK High School		
Name and location		
Course of Study		
Did you graduate? No	o Yes Diploma or HSED?	
Post Secondary Educ	cation and Training	
1. Name and location		
Course of Study _		
Did you graduate?	No Yes Degree or certification	
2. Name and location		
Course of Study _		
Did you graduate?	No Yes Degree or certification _	
3. Name and location		
Course of Study _		
Did you graduate?	No Yes Degree or diploma	
SPECIAL TRAINING		
Languages, machine o	peration, etc. that would benefit you in the job	for which you are applying:

EMPLOYMENT EXPERIENCE

1)	Company Name	Phone ()	
	Address	City/State/Zip		
	Position	Employed from		to
	Supervisor			
	Reason for Leaving			
	Company Name	Phone ()	
	Address	City/State/Zip		
	Position	Employed from		to
	Supervisor			
	Reason for Leaving			
	Company Name	Phone ()	
	Address	City/State/Zip		
	Position	Employed from		to
	Supervisor			
	Reason for Leaving			
RE	<u>FERENCES</u>			
	lame	Relationship to Applicant		Phone
2) ₋ N	lame	Relationship to Applicant		Phone
3)_				
Ν	lame	Relationship to Applicant		Phone
kno om	owledge. I understand that a	his application is true, complete and corre iny false or misleading statements made d of me, shall constitute grounds for rejection sal.	by	me, or material
Ар	plicant Signature	Date	e	

Nondiscrimination Statement

The Richland School District does not discriminate in hiring or other personnel decisions against individuals based on race, color, national origin, sex, age, religion, disability, sexual orientation, veteran's status, or any other characteristic protected by local, state, or federal law. Reasonable accommodations shall be made for qualified individuals with a disability or handicap. If you need an accommodation, please contact the Human Resources Department of the Richland School District.

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Authorization, Release, and Certification Statement

I authorize the Richland School District to investigate my personal employment history and I authorize any former employer, person, firm, corporation or government agency to give the Richland School District any information regarding my employment history.

If I should be offered a position, I understand that a crime information records check will be conducted on me through the Wisconsin Department of Justice. (A criminal record does not constitute an automatic bar to employment and will be considered only if the circumstances of the conviction relate to the circumstances of the particular job in question.)

In consideration of the Richland School District's review of this application, I release from all liability and/or legal claims the Richland School District and every person seeking or providing information, whether it be 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.

If employed, I agree to comply with all the rules and regulations of the Richland School District. I also understand that employment is subject to the satisfactory investigation of the application. I understand any false statements or misrepresentation of facts are grounds for dismissal. I hereby certify that the statements above are true and correct to the best of my knowledge and belief.

Applicant Signature	Date
Date of Birth	Social Security or Drivers License Number