



Whitehall School District

Application for Employment

Whitehall School District
 Attn: Elsa Kulig
 19121 Hobson Street
 Whitehall, WI 54773
 Phone: 715-538-4364 ext. 109
 Fax: 715-538-4639
 kuligels@whitehallsd.k12.wi.us

POSITION(S) APPLYING FOR: _____

Last Name	First Name	Middle Name	Email Address

Address	Street	City	State	Zip Code	Phone
Current					

Have you previously submitted an employment application with the Whitehall School District? YES NO
 (If Yes, give date and position applied for) _____

Date available for employment with the Whitehall School District: _____

Have you ever been employed by the Whitehall School District? YES NO (If Yes, give dates and position) _____

Are you legally eligible to work in the United States? YES NO

Have you ever been convicted of any felony, misdemeanor or other offense (other than minor traffic violations), or do you have such a charge pending? (Please note this information is considered only if the offense(s) substantially relate to the position applied for in this application.)
 YES NO (If yes, please attach an explanation.) _____

Are you able to perform the essential functions of the job for which you are applying? YES NO (If No, please explain)

EDUCATION AND PROFESSIONAL TRAINING

HIGH SCHOOL, TECHNICAL COLLEGE, AND COLLEGE & UNIVERSITY: (list most recent first)

School & Location	Dates Attended	Major	Minor	Degree

REFERENCES

List three persons who are not related to you who have definite knowledge of your qualifications for the position for which you are applying such as co-worker, teacher, etc. DO NOT repeat the names of supervisors previously listed.

Name:	Address:	Phone:
Name:	Address:	Phone:
Name:	Address:	Phone:

Licenses and Relevant Training

List fields of work for which you have been registered, licensed, or certified. (include driving) and specific training you may have that relates to the position you are applying for.

License:	Number:	State:
Relevant Training:		

EMPLOYMENT HISTORY

Describe in detail all work experience beginning with your present or most recent job. Include periods of unemployment, self-employment, military service, internships and volunteer work.

Employer:	Job Title:	Supervisor:
Address:	Phone:	Dates Employed:
Hourly Rate/Salary:		Reason for Leaving:
Job Duties:		

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Address:	Phone:	Dates Employed:
Hourly Rate/Salary:		Reason for Leaving:
Job Duties:		

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Address:	Phone:	Dates Employed:
Hourly Rate/Salary:		Reason for Leaving:
Job Duties:		

APPLICANT STATEMENT

I understand consideration for employment with the Whitehall School District (District) is contingent upon the results of reference and background checks. I authorize District personnel to investigate all information provided by me on my application for employment. I understand this information will be used to evaluate my qualifications and suitability for District employment and to verify the correctness and completeness of the information provided by me.

I further understand the reference and background checks necessitate contacting present and past employers and any listed references or other individuals, who can verify information. I authorize any party (including employers, organizations and/or other individuals with which I have been or am currently associated and all persons connected with them) to release any information they may have about me to the District, including all of my personnel records. I understand the people contacted will be advised what they say will be held in confidence.

To the extent permitted by law, I hereby release from any and all liability the District, its officers, officials and all District employees and agents for acts performed in connection with evaluating my application, background, credentials and qualifications. My signature below certifies that all statements made on this application are true and complete to the best of my knowledge. If employed by this school district, I understand that any misrepresentation of factual information contained herein may be cause for dismissal.

I understand the District does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Date _____ Signature _____

Thank you for completing this application. Your interest in employment with the Whitehall School District is appreciated.

In compliance with the Executive Order 11246; Title II of the Education Amendments of 1976; Title VI of the Civil Rights Act of 1964, as amended by the Equal Employment Opportunity Act of 1972; Title IX Regulation Implementing Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Age Discrimination Act of 1975; and all other Federal, State, School rules, laws, regulations, and policies, the Whitehall School District shall not discriminate on the basis of sex, age, race, color, national origin, or handicap in the educational programs or activities which it operates and in employment.

*Submit completed applications to kuligels@whitehallsd.k12.wi.us, fax to 715-538-4639, mail to Whitehall School District, Attn: Elsa Kulig 19121 Hobson Street, Whitehall, WI 54773 or drop off in person at the school.