



**EMPLOYMENT APPLICATION
SUPPORT STAFF**

A. APPLICANT INFORMATION (please print)

Full name: _____
 Last First Middle

Address: _____
 Street City, state ZIP code

Phone: () _____
 Home Cell

E-mail: _____

B. POSITION/SALARY DESIRED

Position _____ Date available _____

I prefer to work (check all that apply): Full-time Part-time Either Substitute

Salary desired: \$ _____ Hourly Monthly Annually

C. EMPLOYMENT HISTORY (most recent first)

Organization/Address	Position/Duties	Supervisor/Telephone	Dates From/To

D. GENERAL INFORMATION

1. Are you physically and mentally able to perform the essential functions of the position for which you are applying?
 Yes No If no, please describe:

2. First aid: Are you trained in first aid? No Yes (date completed: _____)
 CPR: Are you CPR certified? No Yes (date completed: _____)

3. Foreign language ability: _____
 Speak: Fluently Some None
 Read/write: Fluently Some None

G. CONSENT for BACKGROUND and REFERENCE CHECKS

I authorize Northern Ozaukee School District to conduct investigation of all statements contained in this application, in addition to reference and criminal background checks, related to my suitability for employment. I authorize references and my former employers to disclose to the school district any and all employment records, performance reviews, letters, reports, and other information related to my employment, without giving me prior notice of such disclosure. I hereby release Northern Ozaukee School District, my former employers, references, and all other parties from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. My signature certifies that all information provided on this application is true and correct to the best of my knowledge, and that any omission, falsification, or misrepresentation of information on the application or accompanying documents may be cause for immediate disqualification or termination of employment. In the event I am employed by Northern Ozaukee School District, I agree to abide by all of its applicable policies, procedures, rules, and regulations.

I certify that I have carefully read and understand the preceding paragraph.

Applicant's signature

Date

APPLICANT QUESTIONS

A. What are three reasons why you would like to be an employee of Northern Ozaukee School District?

- 1. _____

- 2. _____

- 3. _____

B. Describe how you perceive yourself interacting with parents, students, community members, and staff members:

