

Application for Employment

Please forward your completed Application to: Mt. Iron-Buhl School District ISD #712 PO Box 537 Mt. Iron, MN 55768 You must complete this form to apply for employment. Answers must be complete and legible.

Position for which you are applying							
Please mark the department(s) for which you would be interested in working: Administration Teaching Para Professional Bus Driver Custodian							
Applicant Information							
Name (Last, First, M.I.)		Area Code/Telephone No.					
Street Address		E-mail Address					
City Sta	te Zip Code	County					
Are you authorized to work in the United States on a full or part-time basis?							
If under the age of 18, please state	your age:						
Are any of your employment records under a different name? \square Yes \square No \square If yes, please provide names:							
Education and Training							
Check all Applicable boxes. Attach college transcript (if Require	ed) Name of Schoo	ol and Degree (if Applicable)	Gradua	ted?			
☐ High School Graduate/GED ☐ Yes ☐ No							
☐ Associates Degree Year Complete							
☐ Bachelors Degree Year Completed							
☐ Masters Degree Year Completed							
☐ Other Year Completed							
Occupational Licenses, Registration, Certificates							
License/Certificates Issued By	Field/Trade/Specialization	License/Certification No.	Issue Date	Expiration	on Date		
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Are you currently under contract wi	th any other school district for nex	xt year?		☐ Yes	□No		
If applying for a Para Professional position, have you completed a minimum of 60 semester (90 quarter) credits from \(\subseteq \) No an accredited post secondary educational institution or have passed the Para Professional Assessment testing? (Official documents are required) Date: Score:							
					□No		
Have you ever been discharged or suspended by an employer or resigned in lieu of dismissal? If Yes, please explain:				☐ Yes	□No		
Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to Yes Claim Veteran's Preference Points?					□No		
Do you wish to claim Veteran's Preference Points?			☐ Yes	□No			
Are you a disabled Veteran and wish to claim additional points?			☐Yes	□No			

Employment History					
Please list below all work-related experience for the past 5 years, starting with the most recent employment. Provide a detailed description of regularly assigned ongoing duties for each job. Additional sheets may be attached if necessary. Do not write "See Resume".					
Job Title	Dates of Employment (Month & Year)				
	From:	То:			
Employer	Supervisor Name and Title				
Business Address	Telephone Number				
Description of job duties	Reason for leaving				
Job Title	Dates of Employment (Month & Year)				
	From:	To:			
Employer	Supervisor Name and Title				
Business Address	Telephone Number				
Description of job duties	Reason for leaving				
Job Title	Dates of Employment (Month & Year)				
	From:	То:			
Employer	Supervisor Name and Title				
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Description of job duties	Reason for leaving				
Job Title	Dates of Employment (Month & Year)				
	From:	То:			
Employer	Supervisor Name and Title				
Business Address					
Description of job duties	Reason for leaving				

Special Skills: List training, licenses, office machines you can operate as well as any other skills which add to your qualifications.						
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Do you have computer skills? Please list software programs you have used:						
Do we have permission to contact your present employed/s/3		☐ Yes ☐ No				
Do we have permission to contact your present employer(s)? Do we have permission to contact your previous employer(s)?	☐ Yes ☐ No					
Check all that you are interested in:	Part-time Temporary					
Date available for employment:	☐ Full-time	Trait-time in temporary				
Date available for employment.						
References (List three PROFESSIONAL refe	rences who may be contac	eted.)				
Name and Address	Telephone Number	Occupation				
Traine and Tradisco	Totophone Hamber	Обобранон				
N. IAII	T N	0 "				
Name and Address	Telephone Number	Occupation				
Name and Address	Telephone Number	Occupation				
Applicant Certific	ation					
I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE, AND COI MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY						
WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION DISCOVERED.	OF EMPLOYMENT, REGARDL	ESS OF WHEN OR HOW				
The application will be given every consideration, but its receipt does not imply that the	applicant will be employed					
		ment without regard to rece				
It is the policy of the Mt. Iron-Buhl School District to afford equal opportunity to all employees and applicants for employment without regard to race, color, creed, religion, national origin, gender, marital status, status with regard to public assistance, disability, sexual orientation, age or membership or activity in a local commission, or any other protected class based on federal, Minnesota State and local law.						
I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.						
If hired, I agree to abide by all of Mt. Iron-Buhl School District policies and regulations. I understand that the Mt. Iron-Buhl School District shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies and procedures. No representative or agent of Mt. Iron-Buhl School District has the authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the School Board of ISD #712, or to make any agreement contrary to the foregoing.						
I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.						
Applicant Signature		Date				

DATA PRIVACY NOTICE. The information requested on this application may be used by the Mt. Iron-Buhl School District in determining the suitability for employment for the position which you are currently seeking or may seek in the future. You are not legally required to provide any of the information on this form at this time. However, failure to provide complete and accurate information may result in the District being unable or unwilling to offer employment to you. The information on this application, which is classified as private data under the Minnesota Government Data Practices Act, will not be released outside the Mt. Iron-Buhl School District without your consent except as necessary for tax purposes or as otherwise required by state or federal law.