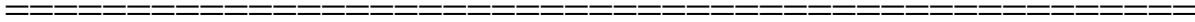


Application For Employment

West Fork Community School



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
How Did You Learn About This Position?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name
Address- Number	Street	City
		State Zip Code
Telephone Number		Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes
 No

Have you ever filed an application with us before? Yes No
 If Yes, give date _____

Have you ever been employed with us before? Yes No
 If Yes, give date _____

Are you currently employed? Yes
 No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because
of Visa or Immigration Status? Yes No
(Proof of citizenship or immigration status will be required upon employment)

On what date would you be available for work? _____

Are you available to work:
 Full Time
 Part Time
 Temporary

Have you ever been convicted of a felony within the last 7 years? Yes No
Conviction will not necessarily disqualify an applicant from employment

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Elementary School	High School	Undergraduate College/Univ.	Graduate Professional
School Name & Location				
Years Completed 4	4 5 6 7 8 9 10 11 12	1 2 3 4	1 2 3	
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities.				
Describe any honors you have received.				
State any additional information you feel may be helpful to us in considering your application.				

List professional, trade, business or civic activities and offices held. *(You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.)*

References

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____

2. _____

3. _____

Have you ever had any job-related training in the United State Military? ___ Yes ___ No

If Yes, please describe _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

___Yes ___No

Employment History

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. Employer		Dates Employed		Work Performed
		From	To	
Address				Final
Telephone Number(s)		Hourly Rate/Salary		
			Starting	
Job Title	Supervisor			
Reason For Leaving				
2. Employer		Dates Employed		Work Performed
		From	To	
Address				Final
Telephone Number(s)		Hourly Rate/Salary		
			Starting	
Job Title	Supervisor			
Reason For Leaving				
3. Employer		Dates Employed		Work Performed
		From	To	
Address				Final
Telephone Number(s)		Hourly Rate/Salary		
			Starting	
Job Title	Supervisor			
Reason For Leaving				
4. Employer		Dates Employed		Work Performed
		From	To	
Address				Final
Telephone Number(s)		Hourly Rate/Salary		
			Starting	
Job Title	Supervisor			

Reason For Leaving

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experiences.

Applicant' Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed

by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ___ Yes ___ No Date of Interview _____
Remarks _____

Employed ___ Yes ___ No Date of Employment _____

Job Title _____ Hourly Rate _____ Department _____

Hired By _____

WEST FORK CSD EQUITY STATEMENT

It is the policy of the West Fork Community School District not to illegally discriminate on the basis of race, color, national origin, gender, disability, religion, creed, age (Employment only), marital status, sexual orientation, gender identity and socioeconomic status (students/program only) in its education programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact the district's Equity Coordinator: Mike Kruger, Superintendent of Schools, 210 S 2nd St, Rockwell, IA 50469, 641-822-3234, mike.kruger@westforkschool.org.