

**GFW SCHOOLS  
ISD NO.2365  
APPLICATION FOR PERSONNEL POSITIONS**

**I. Equal Employment Opportunity**

It is the policy of Independent School District No. 2365 to provide equal employment opportunity for all applicant and employees. The school district does not unlawfully discriminate on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation, age, family care leave status or veteran status. The school district also makes reasonable accommodations for disabled employees.

**II. Data Privacy Notice**

The information requested on this application may be used by the School District in determining 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, accurate information may result in the School District being unable or unwilling to offer employment to you. With respect to any special accommodations necessary for completing your application or the interview process, the School District may be unable to provide the necessary accommodations if you do not provide the requested information. The information on this application which is classified as private data under the Minnesota Government Data Practices Act will not be released outside the School District without your consent except as necessary for tax purposes or as otherwise required by state or federal law.

**III. Position Desired**

Title of position for which you are applying: \_\_\_\_\_

Date Available to Begin Employment: \_\_\_\_\_

**IV Personal Data**

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

\_\_\_\_\_ Alternate Phone \_\_\_\_\_

Are you either a US citizen or legally eligible to hold employment in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you previously worked for Independent School District No. 2365? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, position held/building: \_\_\_\_\_

If yes, under what name may your previous employment records be found?  
\_\_\_\_\_

Do you have any special needs which may necessitate accomodations in the application/interview process? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe the type of accommodation requested:

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List all other names under which you have been employed or under which your educational records may be found.

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**V. Work/Volunteer Experience**

List *all* work and volunteer experience, most recent to be listed first.

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

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Date of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

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Date of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Employment/Experience: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

*Attach additional sheets if necessary.*

**VI. Licensure**

List current licenses, registrations, or certificates relevant to the position for which you are applying.

<u>License/No.</u>	<u>Issued By</u>	<u>Date</u>	<u>Expiration</u>

*All applicable licenses or certifications must be received in Superintendent's office prior to employment.*

**VII. Education**

Include high school and any additional education/courses taken. List most recent first.

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

Name of School: \_\_\_\_\_

Address of School: \_\_\_\_\_

Degree/Diploma Received: \_\_\_\_\_

Major/Minor: \_\_\_\_\_

Dates of Attendance: \_\_\_\_\_

List/describe any other training and/or experience relevant to the position for which you are applying:

\_\_\_\_\_  
\_\_\_\_\_

### **VIII References:**

These should be people in a position to discuss your qualifications for the position you seek. Include especially manager, directors, or heads of departments under whom you have worked. Indicate any who are related to you. The School District reserves the right to contact all prior employers, educational institutions or institutions where you have volunteered in addition to references listed below.

Name of Reference: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

### **IX Criminal Background Information**

Have you ever been charged with a misdemeanor or a felony? \_\_\_\_\_

If yes, please explain the nature of the charge and the circumstances: \_\_\_\_\_

\_\_\_\_\_

Were you convicted and/or did you plead guilty? \_\_\_\_\_

Give the date, city, state and county where convicted: \_\_\_\_\_

\_\_\_\_\_

The School District will conduct a criminal background check on individuals upon making a contingent job offer. No offer of employment shall become final until receipt of the results of the criminal background check from the BCA, the content of which is acceptable to the School District, and approval by the School Board.

### **X Prior Employment**

Have you ever been discharged or forced to resign from prior employment? \_\_\_\_\_

If so, describe the circumstances: \_\_\_\_\_

\_\_\_\_\_

## XI Personal Statement

Please indicate why you are interested in the position and what you hope to accomplish if selected.

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## XII Veterans Preference

**GENERAL:** To qualify for Veterans Preference, you must meet all of the following:

- 1) Have separated under honorable conditions from any branch of the armed forces of the United States;
- 2) have served on active duty for 181 consecutive days or more for the full period ordered to active duty OR have separated by reason of disability incurred while serving on active duty;
- 3) be a United States citizen or resident alien;
- 4) not be eligible for or currently receiving a monthly veteran's pension benefit based on length of military service.

*If you meet all the above, check the appropriate box(es) below.*

### FOR EXAMINATIONS OPEN TO THE PUBLIC:

- I am a non-disabled veteran (5 points)
- I am a disabled veteran with a currently existing, compensable, service-connected disability as judged by the US. Veteran's Administration or by the Retirement Board of the Branches of the Armed Forces (10 points)
- I am the widow/widower (not remarried) of a deceased veteran (5 points)
- I am the spouse of a disabled veteran who cannot work because of the disability (10 points)

### FOR EXAMINATIONS OPEN ONLY TO CURRENT STATE EMPLOYEES:

- I am a disabled veteran entitled to disability compensation for a permanent, service-connected disability rated at 50% or more who has not been previously promoted in the state service (5 points)

You may be required to provide proof of the validity of Veterans Preference Points you claim before you are hired

## XIII Certification, Acknowledgement and Release

I certify that the answers I have given on this application are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the District

In connection with this application I hereby authorize any and all former employers and references named in this application, or any agent of such a former employer, to release to Independent School District No. 2365 and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that Independent School District No. 2365 will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature, below. I hereby release Independent School District No. 2365 and all former employers and references listed herein and any and all agents acting on behalf of said

District, former employers or references, for any and all liability of whatever nature by reason of requesting or providing such information.

**XIV Minnesota Fraud Statute:**

Any person who, with intent to defraud, receives workers' compensation benefits to which the person is not entitled by knowingly misrepresenting, misstating, or failing to disclose any material fact is guilty of theft and shall be sentenced pursuant to section 609.52, subdivision 3.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
(Do Not Print)