Independent School District No 801 Browns Valley Public School Application Form

1. EQUAL EMPLOYMENT OPPORTUNITY

It is the policy of Independent School District No 801 to provide equal employment opportunity for all, without discrimination on the basis of race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, sexual orientation, or age.

2. 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.

3. POSITION DESIRED						
Title of position for which you are app	Title of position for which you are applying:					
Date available to begin employment:	·					
4. PERSONAL DATA						
Name: Last	First	Middle				
Address:Street/PO Box	City	State	Zip Code			
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. 801?						
If yes, under what name may your previous employment record be found?						
List all other names under which you have been employed or under which your educational records may be						
found:						
Race and Ethnicity: Check all that apply. American Indian or Alaskan Native Asian Black or African American Native Hawaiian or Other Pacific Islander White						

WORK/VOLUNTEER EXPERIENCE List all work and volunteer experience, list most recent first.
Employer Name:
Employer Address:
Job Title:
Dates of Employment/Experience:
Reason for Leaving:
Employer Name:
Employer Address:
Job Title:
Dates of Employment/Experience:
Reason for Leaving:
<u> </u>
Employer Name:
Employer Address:
Job Title:
Dates of Employment/Experience:
Reason for Leaving:
Employer Name:
Employer Address:
Job Title: Dates of Employment/Experience:
Dates of Emoloyment/Expendence

ense/No Issued By	Date	Expiration
l applicable licenses or certifications mus	st be received in Superinte	ndent's office prior to employmer
. 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:		

8.	. REFERENCES: These should be people in a position to discuss your qualifications for the position you seek. Include especially managers, 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:			
	E-mail Address:				
	Name of Reference:				
	Address:				
	Phone Number:	Title:			
	E-mail Address:				
	Name of Reference:				
	Address:				
	Phone Number:	Title:			
	E-mail Address:				
9.	CRIMINAL BACKGROUND INFORMATION				
9.		□ Voo. □ No.			
	Have you been convicted of a misdemeanor or a felony?				
	Give the date, city, state and country where convicted.				
	The School District will conduct a criminal background chipob offer. No offer of employment shall become final until background check from the BCA, the content of which is approval by the School Board.	recipe of the results of the criminal			

VETERAN STATUS Are you an honorably discharged veteran of the armed forces of the United States or are you otherwise eligible to claim Veteran's Preference Points? Yes No				
Do you wish to claim Veteran's Preference Points?				
If you are a disabled veteran and wish to claim additional points, please check here. $\ \square$				
11. PRIOR EMPLOYMENT Have you ever been discharged or forced to resign from prior employment? ☐ Yes ☐ No				
If so, describe the circumstances:				
12. PERSONAL STATEMENT Please indicate why you are interested in the position and what you hope to accomplish if selected:				
13. 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. I understand that I may be asked to take an employment physical. The results may determine whether I am capable of performing the duties in the position for which I am applying.				
In connection with this application, I hereby authorize any and all former employers and references named in this application, or any agent of such former employer, to release performance and fitness/qualifications to Independent School District No. 801 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 801 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 801 and all former employers and references listed herein and any and all agents 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.				
Signature Date (Do not type or print)	_			