

# WEST SALEM SCHOOL DISTRICT APPLICATION FOR EMPLOYMENT

**District Office** ❖ 405 East Hamlin Street, West Salem, Wisconsin ❖ (608) 786-0700  
**West Salem Elementary School** ❖ 475 North Mark Street, West Salem, Wisconsin ❖ (608) 786-1662  
**West Salem Middle School** ❖ 450 North Mark Street, West Salem, Wisconsin ❖ (608) 786-2090  
**West Salem High School** ❖ 490 North Mark Street, West Salem, Wisconsin ❖ (608) 786-1220

Each item on this application is important. Please read and complete carefully and accurately.  
**Do not send credentials unless requested.**

## PERSONAL DATA

Date of Application \_\_\_\_\_ Position Applied For \_\_\_\_\_

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Present Address \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Permanent Address \_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Present Phone No. \_\_\_\_\_ Permanent Phone No. \_\_\_\_\_

Are you currently under a contract? \_\_\_\_\_  
Yes No Expiration Date Position Held

Date available for employment in this school district \_\_\_\_\_

Have you ever been denied the renewal of a contract? \_\_\_\_\_ State reason and where \_\_\_\_\_

Have you ever pleaded guilty to or been convicted of a misdemeanor or felony? Yes / No

Do you have any pending criminal charges? Yes / No

If yes to either of the above, please explain. Include date/s, location of court, nature and place of charge or conviction and disposition of the case.

## REFERENCES

Name	Title	Company Name	Telephone
1.			
2.			
3.			
4.			

**EDUCATIONAL PREPARATION AND TRAINING**

High School \_\_\_\_\_ Location \_\_\_\_\_  
Date of Graduation \_\_\_\_\_ City/State \_\_\_\_\_

**Training and Educational Preparation**

Name & Location	Dates Attended	Type of Training/Degree

**TEACHING and RELATED EDUCATION WORK EXPERIENCE (List most recent first)**

Date From/To	Name of Employer	Location	Type of Work	Reason for Leaving
1.				
2.				
3.				
4.				
5.				

**OTHER WORK EXPERIENCE (List most recent first)**

Date From/To	Name of Employer	Location	Type of Work	Reason for Leaving
1.				
2.				
3.				
4.				
5.				



**Authorization, Release and Certification**

I authorize the School District to investigate my personal employment history and I authorize any former employers, person, firm, corporation, or government agency to give the school District any information regarding my employment history.

If you should be offered a position, a crime information records check will be conducted on you through the Wisconsin Department of Justice. (A criminal record does not constitute an automatic bar to employment and will be considered only if the circumstances of the conviction relate to the circumstances of the particular job in question.)

In consideration of the School District's review of this application, I release from all liability and/or legal claims the School District and every person seeking or providing information, whether it is oral or written. A photocopy of this release shall be as valid as the original, and may be relied upon by all persons providing information.

Further, I certify that all information on this application is true, complete and correct to the best of my knowledge. I understand that any false or misleading statements made by me, or material omissions of information requested of me, shall constitute grounds for rejection of my application, or if employed, my immediate dismissal.

**Submit and Agree to Release/Certification**

If employed, I agree to comply with all the rules and regulations of the School District. I also understand that employment is subject to the satisfactory investigation of the application and a favorable physical examination report, including a chest x-ray or tuberculin test. I understand any false statements or misrepresentation of facts are grounds for dismissal. I hereby certify that the statements above are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
APPLICANT'S NAME (PRINT)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

The West Salem School District shall not discriminate on the basis of race, religion, creed, political affiliation, physical, mental, emotional or learning disabilities, handicap, sex, sexual orientation, age, national origin, citizenship, marital or parental status, ancestry, color, arrest or conviction record, membership in National Guard, state defense force or any other reserve component of the military forces of the United States, or any other reason prohibited by state and federal law.

**OFFICE USE ONLY**

**NEW EMPLOYEE INFORMATION - INCLUDE IN BOARD RECOMMENDATION**

Position \_\_\_\_\_

Workday consists of \_\_\_\_\_ Hours \_\_\_\_\_ Percent

\_\_\_\_\_ Degree \_\_\_\_\_ Credits \_\_\_\_\_ Experience

Replacing another staff member Yes / No Temporary / Permanent Position

If so, whom \_\_\_\_\_

Which School? High School Middle School Elementary School

Start Date \_\_\_\_\_ Extra Days \_\_\_\_\_ Date of Birth \_\_\_\_\_

Extended Contract \_\_\_\_\_ License \_\_\_\_\_ For Background Check Only