

Describe training, experiences or special skills that you possess which you feel are relevant to the position you are applying for:

Write a brief statement about why you feel you are qualified for the position for which you are applying: _____

Are you capable of performing the essential functions of the job with or without reasonable accommodations? _____

Do you have any physical limitations that may prevent you from performing the tasks required by the position? (for example: lack of manual dexterity, fear of heights, inability to lift up to 30 pounds repetitively, restricted motion) _____

Please describe any yes answer to this question. _____

LIST AT LEAST ONE REFERENCE, OTHER THAN FORMER EMPLOYERS, WHOM WE MAY CONTACT

Name _____ Relationship _____ Phone ____ - ____ - _____

Address _____
Street City State Zip

Name _____ Relationship _____ Phone ____ - ____ - _____

Address _____
Street City State Zip

Name _____ Relationship _____ Phone ____ - ____ - _____

Address _____
Street City State Zip

NOTE TO ALL APPLICANTS:

PER SCHOOL BOARD POLICY #831 (G): Effective August 22, 1990, all the buildings, grounds, vehicles and any and all facilities owned by the School District of Sheboygan Falls and all such buildings, grounds, vehicles and any and all facilities under the care, custody or control of the district shall be declared tobacco free.

This application is active for 6 months.

Please sign and date below. I certify that the information contained in this application is true and correct. I understand that falsification of this application in any detail is grounds for disqualification for further consideration or for dismissal from employment in accordance with Board of Education policy. I agree to conform to the rules and regulations of the Board of Education and understand that my employment can be terminated for failure to follow said rules and regulations. I authorize persons, schools, my current employer and previous employers named in this application to provide any relevant information that may be required to arrive at an employment decision.

Signature of Applicant

Date of Application

The School District of Sheboygan Falls shall not discriminate on the basis of gender, race, national origin, ancestry, religion, age, sexual orientation, pregnancy, marital or parental status, or physical/mental/emotional/learning disability in its educational programs, activities or employment.

If you have any questions or concerns regarding this policy, please contact the Title IX Coordinator; District Office; School District of Sheboygan Falls, 220 Amherst Avenue; Sheboygan Falls, WI 53085 or call 920-467-7893.

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