

# Iola-Scandinavia School District

## Application for Employment

### Mission Statement

Our mission is to establish a foundation for lifelong learning by focusing on educating all students to the best of their abilities. Through instruction in basic and higher level thinking skills across the curriculum, students will become literate, self-disciplined, independent and confident learners who demonstrate positive attitudes and appropriate social/emotional behavior.

We believe each educator, parent/guardian, and student will work together in achieving this mission.

### Equal Employment Opportunities

The School District of Iola-Scandinavia shall provide equal employment opportunities to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, handicap, disability, marital status, ancestry, arrest or conviction record, political affiliation (teachers only), sexual orientation, citizenship, creed, membership in the national guard, state defense force or any other United States or Wisconsin reserve component of the military forces or use or nonuse of a lawful product off school premises during nonworking hours or any other reason prohibited by state or federal law. This policy shall apply to all terms and conditions of employment, including but not limited to, hiring, placement, promotion, termination, layoff, recall, transfer, leave of absence, compensation and training.

Reasonable accommodations shall be made for qualified individuals with a disability or handicap, unless such accommodations would impose an undue hardship to the district.

Complaints should be addressed to: Administrative Office, Iola-Scandinavia School District, 450 East Division Street, Iola, WI 54945



## Work History

List your work experience including military and/or volunteer, most recent first.

From	_____	To	_____	_____	_____		
	Mo./Yr.		Mo./Yr.	Employer	May we contact for a reference?	Yes	No
Supervisor:	_____			_____			
	Name	Address	Title		Phone		
Job Duties:	_____						
Reason for Leaving:	_____						
From	_____	To	_____	_____	_____		
	Mo./Yr.		Mo./Yr.	Employer	May we contact for a reference?	Yes	No
Supervisor:	_____			_____			
	Name	Address	Title		Phone		
Job Duties:	_____						
Reason for Leaving:	_____						
From	_____	To	_____	_____	_____		
	Mo./Yr.		Mo./Yr.	Employer	May we contact for a reference?	Yes	No
Supervisor:	_____			_____			
	Name	Address	Title		Phone		
Job Duties:	_____						
Reason for Leaving:	_____						
From	_____	To	_____	_____	_____		
	Mo./Yr.		Mo./Yr.	Employer	May we contact for a reference?	Yes	No
Supervisor:	_____			_____			
	Name	Address	Title		Phone		
Job Duties:	_____						
Reason for Leaving:	_____						
From	_____	To	_____	_____	_____		
	Mo./Yr.		Mo./Yr.	Employer	May we contact for a reference?	Yes	No
Supervisor:	_____			_____			
	Name	Address	Title		Phone		
Job Duties:	_____						
Reason for Leaving:	_____						

Please include any other areas in which you have documented training or other information you feel pertinent: \_\_\_\_\_

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**READ AND SIGN**

My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, medical records and other appropriate sources. I waive my right to access to any such information and without limitation hereby release the school district and the reference source from any liability in connection with its release or use.

I understand that the school district is committed to maintaining a drug-free workplace. I am aware that the school district may require a drug test as a part of the hiring process. I understand and agree that a result showing the presence of illegal or illicit substances shall be sufficient grounds for failure to employ or for my discharge should I become employed by the school district.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, false answered statements made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Applicant's Signature

Date

The Iola-Scandinavia School District does not discriminate on the basis of religion, race, color, national origin, ancestry, age, sex, physical appearances, marital status, disability, arrest or conviction record, political belief, sexual orientation, use of lawful products outside the work place, less than honorable discharge, source of income or the fact that an individual is a student.

Only Complete Applications Will Be Considered.