

**INDEPENDENT SCHOOL DISTRICT 518**

John Landgaard  
Superintendent

David Skog  
Director of Management Services

**DISTRICT ADMINISTRATIVE OFFICE**

Phone 507-372-2172  
1117 Marine Avenue  
Worthington MN 56187-1610

Fax 507-372-2174

“An Equal Employment Opportunity/Affirmative Action Employer”

**CLASSIFIED APPLICATION**

You may use your resume to supplement this application, however, please complete the entire application.

POSITION APPLYING FOR \_\_\_\_\_

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

DATE AVAILABLE FOR EMPLOYMENT \_\_\_\_\_

Can you, after employment, submit verification of your legal right to work in the United States? YES \_\_\_ NO \_\_\_

ARMED FORCES: YES \_\_\_ NO \_\_\_ BRANCH \_\_\_\_\_

Date of Discharge \_\_\_\_\_ Rank at Discharge \_\_\_\_\_

Have you ever been convicted of a crime? YES \_\_\_ NO \_\_\_  
(A conviction will not necessarily disqualify an applicant from employment.)  
If yes, please explain \_\_\_\_\_

If you are selected for the position, you will be asked questions relative to special requirements.  
Circle the special skills you have: boiler operator, carpenter skills, painting skills, cooking skills.

**EDUCATION**

SCHOOL	ADDRESS	COURSE OF STUDY	YEARS COMPLETED

**PERSONAL REFERENCES** (Excluding former employers or relatives)

NAME AND JOB TITLE	ADDRESS	PHONE NUMBER

**EMPLOYMENT (Starting with Present or Most Recent Employer)**

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Employer Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Weekly Pay \_\_\_\_\_  
Job Title and Describe Your Work \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**EMPLOYMENT**

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Employer Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Weekly Pay \_\_\_\_\_  
Job Title and Describe Your Work \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

**EMPLOYMENT**

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Employer Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Weekly Pay \_\_\_\_\_  
Job Title and Describe Your Work \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

1. Have you ever been involuntarily discharged or fired? \_\_\_\_\_  
Please explain: \_\_\_\_\_
2. In your previous work, what did you enjoy the most? \_\_\_\_\_  
\_\_\_\_\_
3. How do you prepare for a day's work? \_\_\_\_\_  
\_\_\_\_\_
4. Which is more important to you; to have a good supervisor or to have good pay and benefits? \_\_\_\_\_  
\_\_\_\_\_
5. Please describe for us an excellent employee. \_\_\_\_\_  
\_\_\_\_\_
6. Why do you want to work for the Independent School District 518? \_\_\_\_\_  
\_\_\_\_\_

**EQUAL EMPLOYMENT OPPORTUNITY, REASONABLE ACCOMMODATION AND VETERAN'S PREFERENCE**

Independent School District 518's policy is to provide equal employment opportunity for all applicants and employees. Independent School District 518 does not unlawfully discriminate on the basis of race, color, creed, religion, national origin, sex, marital status, veteran status, sexual orientation, age or disability.

Are you able to perform the duties of the position for which you are applying, including regular attendance, with or without a reasonable accommodation? (If you need an explanation for the meaning of "reasonable accommodation," please contact John Landgaard, Superintendent.) YES \_\_\_ NO \_\_\_

If you are a veteran or a spouse of a deceased or disabled veteran and wish to claim veteran's preference, you must present a legible photocopy of your DD214 to the Personnel Office. If your claim is approved, preference points will be applied to applicable law.

**CONSENT TO RELEASE OF INFORMATION**

I request, authorize and consent to the release of information to Independent School District 518, Worthington, MN (ISD 518) regarding my previous employment and authorize all past employers or agent they may designate, to respond to verbal or written inquiries from Independent School District 518, regarding my employment record. I further request, authorize and consent to Independent School District 518 contacting the personal references identified in my application through verbal or written inquiries for purposes of confirming information contained in my application for employment as well as reliability, honesty, and potential tendency, if any, to engage in any form of violence or other harmful, unsafe or threatening behavior. Finally, I request, authorize and consent to the release and disclosure of educational records from any and all public or private educational institutions that I have attended and to release information from any public agency or private entity concerning any professional or vocational license or certification that I have held in the past, or currently hold, to Independent School District 518.

**CERTIFICATION**

I have answered all questions to the best of my knowledge. I certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents such as the Child Support Disclosure Form and the Employment Eligibility Verification (Form I-9), regardless of when discovered to be false, misrepresented or omitted, shall be considered sufficient cause for my dismissal.

**CRIMINAL HISTORY BACKGROUND CHECK**

**IF EMPLOYED BY THIS DISTRICT**, I authorize the Minnesota Bureau of Criminal Apprehension to disclose criminal history record information to Independent School District 518 pursuant to Minnesota Statute 123B.03 for the purpose of employment. I understand that my employment with Independent School District 518 is conditional pending completion of the background check. I further understand that I may be terminated based upon the results of the background check.

**I agree to provide a check payable to the Independent School District 518 (or cash) in the amount of \$15.00 to pay the fee for conducting the criminal history background check.**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

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## **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 Independent School District 518.

I understand, acknowledge and agree that no offer of employment is valid or binding until formal approval by Independent School District 518 board of Directors and that until such approval that Independent School District 518 shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application I hereby authorize any and all current and former employers, organizations where I have volunteered ("volunteer organizations") and references named in this application, or any agent of such a former employer or volunteer organizations, to release to Independent School District 518 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, including, but not limited to performance evaluations, letters, documents, or other related information. I understand that Independent School District 518 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 518 and all former employers, volunteer organizations, or references listed herein and any and all agents acting on behalf of Independent School District 518, former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting of providing such information.

Date \_\_\_\_\_

Signature \_\_\_\_\_

(Do Not Print)