# Classified Employment Application

Elkton School District 5-3 Office of the Superintendent 508 Buffalo St Elkton, SD 57026 605-542-2541 Fax: 605-542-4441

Please Print or Type									
Personal D	Data								
Mr.	Ms.	Mrs. I	Dr.						
Name									
	(Last)		(First)	(Middle Initia	al)	(Maiden)			
Address	(Otre et)			(City State 7in	Cada)				
	(Street)			(City, State, Zip	Code)				
Phone									
FIIUITE	(Home)		(Cell)		(Other)	1			
E-mail Ad	dress								
				_					
Referral S	ource:	Newspap	er Job Line	Persona	l Referral	Other	· · · · · · · · · · · · · · · · · · ·		
Desition f		you are app	lying						
POSICIONIC	or which	you are app	nying						
Custodian Substitute		te-teacher	For Substitute Teacher: Do you hold a current teaching Certificate						
Maintena	nce	Dara Dro	ofessional		Yes	No			
School L	unch	r ala-rit	Jessional	For Para-Professional: Do you have 2 years of college or					
Secretari		If other, s	specify position	have you pas	ota's Praxis test?				
Secretaria					Yes	No			
Education	al Prepa	ration							
Name of School			Location (City and State)		Year	Degree	Major		
High School									
Undergraduate									
Undergraduate									

College activities in which you participated: \_\_\_\_\_

Graduate

Computer experience:  $\Box$  Minimal  $\Box$  Proficient  $\Box$  Advanced

## **Employment History** (if more space is needed, please submit on a separate sheet of paper) Begin with your current or most recent position. List each promotion as a separate job. Include paid and verifiable nonpaid experience, including military service. Be as accurate and complete as possible, especially in describing the duties of each position.

Present or Last Employer	Dates (Month and Year)		Time ✓		Total Number of	
		From	То	Part	Full	Years
Address (City and State)	Phone					
Job Title	Supervisor		Supervisor's T	ïtle		

Duties

#### **Reason for Leaving**

Second Previous Employer	Dates (Month and Year)		Time ✓		Total Number of	
		From	То	Part	Full	Years
Address (City and State)	Phone					
Job Title	Supervisor		Supervisor's T	itle		

Duties

#### Reason for Leaving

Third Previous Employer	Dates (Month and Year)		Time ✓		Total Number of	
	From		То	Part	Full	Years
Address (City and State)	Phone					
Job Title	Supervisor	Supervisor's T		itle		

Duties

### Reason for Leaving

Fourth Previous Employer	Dates (Month and Year)		Time ✓		Total Number of	
		From	То	Part	Full	Years
Address (City and State)	Phone					
Job Title	Supervisor		Supervisor's T	itle		

Duties

#### **Reason for Leaving**

The Elkton School District #5-3 is an equal opportunity employer and does not discriminate because of race, color, age, sex, marital status, religion, status with regard to public assistance or disability, national origin or veteran's status.

References and Additional Information			
May we contact your current employer for a reference?	Yes	No	If no- why?

Use this space for additional information about yourself, listing additional training and skills that you feel would be applicable to the position for which you are applying.

## **Conviction Report**

Because of the tremendous responsibility Elkton School District #5-3 has to its school children and community, the following information is needed from all applicants regarding convictions. Failure to complete this form accurately and completely will result in disqualification from consideration for employment. Such action may also be cause for consideration of dismissal if employed, and may result in prosecution for filing false information with a public agency. Applicants and employees must report any convictions that occur subsequent to the time they initially complete this form.

Have you ever been convicted of a felony or misdemeanor other than minor traffic violations?  $\Box$  Yes  $\Box$  No If "yes," provide date(s) and a written explanation.

## **Applicant's Certificate and Release**

Under penalty of prosecution and dismissal, I hereby certify that the information presented on this application is true, accurate and complete. I authorize the investigation of all statements contained herein and understand that any document relevant to this information may be reviewed by the agents of Elkton School District #5-3. I authorize the Elkton School District #5-3 to make reference checks and past employment inquiries prior to employment, and I will execute such documents as are needed to facilitate this investigation.

Before employment can be finalized, I must pass a background investigation. All necessary certification/license and official transcripts must be provided. The School Board must approve my employment. I understand that misrepresentation or omission of pertinent facts may be cause for dismissal.

(Applicant Signature)

(Date)