

BALDWIN-WOODVILLE AREA SCHOOL DISTRICT
550 HIGHWAY 12, BALDWIN, WI 54002

APPLICATION FOR SUBSTITUTE SUPPORT STAFF

(APPLICATION MAY EITHER BE TYPED OR HANDWRITTEN LEGIBLY.)

Name _____ Date of Application _____

Address _____ Phone _____

For what areas or positions would you like to substitute?

EDUCATION

HIGH SCHOOL _____ Date of Graduation _____
(Name & _____
Location)

VOCATIONAL SCHOOL _____ Grade/Degree
Completed _____

COLLEGE _____ Grade/ Degree
Completed _____

EMPLOYMENT HISTORY

(Starting with the most recent)

<u>Name & Address of Company</u>	<u>Phone</u>	<u>From</u>	<u>To</u>	<u>Reason for Leaving</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

SPECIAL SKILLS AND/OR TRAINING RELATED TO JOB:

Why are you interested in working as a substitute in the Baldwin-Woodville Area School District?

JOB REFERENCES: Give names of three references who have firsthand knowledge of your character, job performances and, personality. Do not list relatives.

<u>Name</u>	<u>Position</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

GENERAL INFORMATION

1. Do you have the legal right to work in the United States? Yes No If not, why?

2. Have you ever applied for a job with us before? Yes No

3. Is there a criminal charge, felony or misdemeanor currently pending against you?

Yes No (If yes, please give a brief explanation.) _____

Have you ever been convicted of a crime, felony or misdemeanor which would substantially relate to the position you are applying for with the District or which would affect your ability to be bonded?

Yes No (If yes, please give a brief explanatory statement.)

(Conviction of a crime or arrest is not an automatic bar to employment. The District will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.)

4. Have you ever been discharged or requested to resign from a position? Yes No

(If yes, give circumstances.) _____

The Baldwin-Woodville Area School District is an equal opportunity employer. Qualified applicants will receive equal consideration. The Baldwin-Woodville Area School District does not discriminate on the basis of age, ancestry, arrest record or conviction record, color, creed, handicap, marital status, national origin, political affiliation, religion, sex or sexual orientation. This form may be destroyed any time after three years from the date of application.

Baldwin-Woodville Area School District
CONSENT TO CONDUCT
CRIMINAL BACKGROUND CHECK

NOTE TO APPLICANTS: The Baldwin-Woodville Area School District conducts criminal background checks for all new hires and volunteers working with District programs. A criminal conviction or pending criminal charge may be a factor in the hiring decision. An actual check of conviction records and/or pending criminal charges will be conducted only if you are a finalist for the position. The information requested below is required to conduct a criminal history background check and will not be used for any other purpose. Discrimination on the basis of age, gender, race or any other protected class status is prohibited by District policy.

A record of conviction and/or pending criminal charges is not an absolute bar to employment. Such information will be considered only if there is a substantial relationship between the circumstances of the conviction and/or pending charge and the position being applied for. Your completion of this form is part of your application process. Applicants must fill out the form accurately and completely. Applicants who fail to complete the form will not be further considered for employment. An applicant's failure to accurately and completely disclose his or her criminal conviction history may be grounds for removal from further consideration for a position.

POSITION BEING CONSIDERED FOR: _____

NAME: _____
First Middle Last

OTHER NAMES YOU HAVE USED: _____

CURRENT ADDRESS: _____
Street City State Zip

DATE OF BIRTH: _____ **GENDER:** Female ___ Male ___ **SOCIAL SECURITY NUMBER:** _____
Month/Day/Year

Have you ever been convicted of a felony, misdemeanor or ordinance violation (including receipt of a fine) other than non-moving traffic violations? Failure to disclose a conviction for any felony will be considered an intentional omission. Please make every effort to be as accurate as possible when disclosing felonies, misdemeanors or ordinance violations.

No ___ Yes ___ If yes, indicate below: *(Nature of the Offense, Date of Conviction, Name and Location of Court)*

Do you have any charges **pending** against you? No ___ Yes ___ If yes, please indicate the nature of the charges: _____

I agree that the District may conduct a criminal history background check. To the best of my knowledge, the information provided on this form is true and complete. I understand that falsification or omission of information constitutes grounds for not hiring me or for dismissal.

Signature of Applicant

Date