

Superintendent: Dr. David Baukol  
Principal: Tate Jerome  
311 First Street West  
PO Box 68  
Chokio, MN 56221  
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Chokio-Alberta Public Schools  
ISD#0771  
311 1<sup>st</sup> St W PO Box 68  
Chokio MN 56221  
Ph: 320-324-7131/Fax: 320-324-2731

I am applying for:

Paraeducator  
 Secretary  
 Cust./Maint.  
 Food Service  
 Licensed Teacher  
 Licensed Substitute  
 Non-Lic Substitute

## Application for Employment

We appreciate your interest in applying for employment with the Chokio-Alberta Public School District. We believe that every individual should be treated fairly, equitable and without regard to race, color, creed, religion, national origin, sex, marital status, status with regard to public assistance, disability, or age as required by Minnesota and Federal Laws. Inquiries regarding compliance with these laws may be directed to the district's Title IX Director, or to the Director of the office for Civil Rights, Dept. of Health, Education and Welfare, Washington, D.C.

Each time you apply for a position you must send a new letter of application. Applications are kept on file for a period of one year. You may use your resume to supplement this summary, however, please complete the entire application.

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

POSITION APPLIED FOR \_\_\_\_\_ PHONE # (work) \_\_\_\_\_ (home) \_\_\_\_\_

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

PREVIOUS LOCATION, STATE(S) OF RESIDENCE \_\_\_\_\_

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

VETERAN'S PREFERENCE: If you are a veteran and wish to claim veteran's preference, you must present a legible photo copy of your DD214 to the Superintendent of Schools. If your claim is approved, five or ten additional points will be added to your final passing score.

Served in Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_

### EDUCATION

School	Name and Location of School	Course of Study	# of Years Completed
High	_____	_____	_____
College	_____	_____	_____
Other	_____	_____	_____

### PERSONAL REFERENCES (Excluding Former Employers or Relatives)

Name and Occupation	Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

## EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

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Company Name	Telephone
	(      )
Address	Employed (Month/Year)
	From                      To
Name of Supervisor	Weekly Pay
	Start                      Last
Job Title/Describe Your Work	Reason for Leaving

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Company Name	Telephone
	(      )
Address	Employed (Month/Year)
	From                      To
Name of Supervisor	Weekly Pay
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Job Title/Describe Your Work	Reason for Leaving

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Explain any additional experiences, talents or skills that you possess which would be applicable to the position for which you are applying.

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List any hobbies, special interests, etc.

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Following are questions that pertain only to certain areas of employment. Please complete only the section(s) that applies to your application for employment.

**FOOD SERVICE**

Do you have preference for the number of hours you work? ( ) No. Preference ( ) Yes. If yes, how many hours per day would you like to work? \_\_\_\_\_ Which hours are you able to work? From \_\_\_\_\_ To \_\_\_\_\_.

**PARAPROFESSIONALS**

Do you have preference for a specific program in which you would like to work? ( ) No Preference ( ) Yes. If yes, please indicate your preferences: \_\_\_\_\_.

Indicate any clerical skills you have: \_\_\_\_\_ Typing (Speed \_\_\_\_\_ wpm) Other \_\_\_\_\_.

Do you have preference for the number of hours you work? ( ) No. Preference ( ) Yes. If yes, how many hours per day would you like to work? \_\_\_\_\_ Which hours are you able to work? From \_\_\_\_\_ To \_\_\_\_\_.

Do you have a **current** First Aid Certificate: ( ) No ( ) Yes  
CPR ( ) No ( ) Yes  
WSI ( ) No ( ) Yes

**MAINTENANCE, CUSTODIAN, ENGINEER APPLICANTS:**

Indicate any trade cards or engineer's license for which you are qualified and/or hold.

\_\_\_\_\_  
\_\_\_\_\_

**SECRETARIAL/CLERICAL APPLICANTS:**

Do you want to work: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ How many months per year: 9 \_\_\_\_\_ 12 \_\_\_\_\_

Indicate below specific experience you have had:

Years Experience	Remarks
_____ General Secretarial	_____
_____ Typing (Speed _____ wpm)	_____
_____ Original Correspondence	_____
_____ Statistical Work	_____
_____ Receptionist	_____
_____ Bookkeeping	_____
_____ Personal Computer Brand Name _____	_____
_____ Word Processor _____ data base _____ spreadsheet	_____
_____ Other	_____

Please answer these questions in terms of what is right for you.

1. In your previous work what did you enjoy the most?

\_\_\_\_\_  
\_\_\_\_\_

2. What makes you feel important or significant?

\_\_\_\_\_  
\_\_\_\_\_

3. What can your supervisor do to help you do a better job?

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4. How do you prepare for a days work?

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5. Which is more important to you – to have a good supervisor or to have good pay and benefits?

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6. Please describe for us an excellent employee?

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7. Why do you want to work for the Chokio-Alberta Public School District?

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I give permission to communicate with past employers, personal references, credit references and schools. I have answered all questions to the best of my knowledge. I agree to give Independent School District #771 at least fourteen days prior notice in the event of my resignation. I hereby 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 employed, falsified statements on this application shall be considered sufficient cause for dismissal. The education, experience and reference portion of the application may have reference to my previous name of:

\_\_\_\_\_ (check if not applicable).

Date \_\_\_\_\_ Applicant's Signature \_\_\_\_\_

NOTICE: Please be advised that, under the provisions of the Minnesota Government Data Privacy Act, some of the data on this application may be classified as private or confidential data. This data is being collected as part of the application process and will be used by the school district for hiring decision. You are required to provide this data, and your failure to do so will eliminate you from further consideration for employment. Administrative officer, supervisors and confidential employees of the school district who are or may be involved in the hiring decision have a right to have access to the data provided.

Alien Statues: After July 1, 1987, no one can be employed without proof of citizenship. The final candidate for each position will be requested to fill out an INS Form. Copies of the driver's license and social security card (or other proof of citizenship) will be duplicated and kept on file.

**OFFICE OF THE SUPERINTENDENT**