

SCHOOL DISTRICT OF BENTON

District Office
41 Alma Street
Benton, Wisconsin 53803
APPLICATION FOR EMPLOYMENT
SUPPORT STAFF

Name _____ Date of Application _____

Street _____ Phone _____

City, State _____ Zip _____

Type of position(s) applying for: *Circle position(s)*

Instructional
Aide

Secretarial

Custodial

Food Service

Other _____

Are you interested in work as a substitute for the above position? Yes No ___ ___

Do you currently hold a certification as a Handicapped Children's Aide? Yes No ___ ___

If yes, give expiration date _____

Do you hold certification as a teacher? Yes No ___ ___

If yes, give subject, level of certification, and expiration date.

EDUCATION (List High School first, then most recent post-secondary)

School	City, State	Course of Study or Major	Degree or Certificate Earned

WORK EXPERIENCE (Most recent first)

Employer	Dates of Employment	Job Assignment	Supervisor's Name

(Continued)

REFERENCES

Please list the names of three persons (*not relatives*) whom we can contact concerning your character and abilities.

Name	Address	Phone	Your Relationship With This Person

Describe related experiences which you believe will help in this position.

Are you able to perform the essential functions of the job with/without accommodations?

The School District of Benton is an equal opportunity employer and does not discriminate on the basis of age, race, creed, color, handicap, marital status, sex, national origin, ancestry, sexually orientation, arrest record, conviction record or membership in the National Guard, state defense force or any other reserve component of the military forces of Wisconsin or the United States.

If any misrepresentation has been made by me, any offer of employment may be withdrawn or my employment may be terminated immediately.

Signature of Application

