

**APPLICATION FOR EMPLOYMENT**  
**DROUGHT SCHOOL**  
**21016 W. 7 MILE RD.**  
**FRANKSVILLE, WI 53126**

*It is the policy of the School District of Norway Jt. 7 not to discriminate on the basis of race, color, national origin, sex, age, or handicap in its education programs or activities as required by Title IX of the 1972 Education Amendments and Section 504 of the Rehabilitation Act of 1973.*

Date: \_\_\_\_\_

**Personal Information**

Last Name	First Name	Middle Initial	Sex	Social Security Number
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Address	City	State	Zip	Phone Number
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Permanent Address	City	State	Zip	Phone Number
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Have you ever been convicted of a crime?  Yes  No  
 If yes, please include dates and locations in explanation below:

\_\_\_\_\_

\_\_\_\_\_

Have you ever been interviewed by a representative of our school?  Yes  No

If yes, when and for what position? \_\_\_\_\_

**Educational and Professional Training**

Are you a graduate of a four year accredited college or university?  Yes: \_\_\_\_\_ If No, when will you graduate? \_\_\_\_\_  
 (Name of college/University)

Do you possess a Bachelor's Degree?  Yes: \_\_\_\_\_  No  
 (Field of Degree)

Are you currently under contract?  Yes  No If Yes, expiration date: \_\_\_\_\_

Wisconsin Certification(s) held: \_\_\_\_\_ Exp.date(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please list on the back any other training that you feel is an asset to the position you are applying for. Include name and location of institution(s), dates, and credit hours.

## Teaching Experience

Briefly describe your teaching experience in chronological order:

From	Dates To	Subjects, Grade Levels or Areas	Name of Supervisor	Name and Address of Institution	Full or Part-Time

(More space on back if needed)

References – Persons who can attest to your abilities-including supervisors, principals, and superintendents from previous places of employment.

Name	Title	Organization	Address	Telephone Number

## General Information

When will you be available? \_\_\_\_\_

Please indicate choice (1, 2, 3, etc.) of preference the levels you wish to be involved with:

Lower grades (K-4<sup>th</sup>)    Upper grades (5-8<sup>th</sup>)    Part-time    Full-time

Please list your subject preferences you would like to teach: \_\_\_\_\_

Do you have any medical limitations that may restrict you from performing your job? If yes, please explain:

\_\_\_\_\_

Would you be taking advantage of the district's health insurance plan?  Yes:  Single  Family  No

**Military Service:**

Dates and branch of military service: \_\_\_\_\_

**I certify that all information contained herein is true and accurate to the best of my knowledge and ability.**

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_