# Paynesville Area Schools
## Noncertified Application Form

**217 West Mill St., Paynesville, Minnesota 56362**
**Phone: (320) 243-3410 Fax: (320) 243-7525 Website: www.paynesvilleschools.com**

***Thank you for your interest in the Paynesville Area School District. To fully assess your professional background, we request an accurate statement of your qualifications for the position for which you are applying. Only applications that are complete will be considered. Your application is complete when we have received the Application Form (completed and signed), Resume, and a minimum of three letters of recommendation.***

**POSITION(S) FOR WHICH YOU ARE APPLYING:**

1. _____

2. _____

3. _____

4. _____

## I. PERSONAL INFORMATION:

1. NAME _____
2. PRESENT ADDRESS _____
   City State Zip
3. PERMANENT ADDRESS _____
   City State Zip
4. CONTACT NUMBERS: Day phone # _____ Evening # _____
   Permanent phone # _____ Cell phone #_____
   Email address _____
5. Are you legally eligible for employment in the United States? Yes ☐ No ☐

## II. EDUCATIONAL PREPARATION:

| High School College/University Attended | City/State | Degree Awarded | Major | Minor |
|---|---|---|---|---|
| | | | | |
| | | | | |
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Please list any academic honors/awards you have received during or after high school/college:

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## III. WORK EXPERIENCE:

List any work experience that you have had. List the most recent first. Circle full-time or part-time.

Employer: _____ Title: _____ Dates _____ to _____ F/T P/T

Employer: _____ Title: _____ Dates _____ to _____ F/T P/T

Employer: _____ Title: _____ Dates _____ to _____ F/T P/T

Employer: _____ Title: _____ Dates _____ to _____ F/T P/T

Employer: _____ Title: _____ Dates _____ to _____ F/T P/T

## IV. REFERENCES

1. Give names, addresses and phone numbers (both home and work) of at least three people who have closely observed your work. Applicants with experience must provide recommendations from current or most recent employer.

a. _____
Name Job Title Address Phone (Work) Phone (Home)

b. _____
Name Job Title Address Phone (Work) Phone (Home)

c. _____
Name Job Title Address Phone (Work) Phone (Home)

d. _____
Name Job Title Address Phone (Work) Phone (Home)

2. May we contact those named above and/or your supervisor in past and present positions?

Yes _____ No _____ If "no," indicate which one(s) you do not wish us to contact.

## V. TRAINING & PROFESSIONAL DEVELOPMENT

1. Please check the following categories in which you have specific training or expertise.

- ☐ Food Service Management
- ☐ Boiler Training
- ☐ Classroom Management
- ☐ Differential Instruction/Learning Styles
- ☐ Second Language Learners
- ☐ Technology Skills
- ☐ Special Education/Remedial
- ☐ Minnesota Educational Effectiveness Program

2. For each category checked, describe the training and/or applied experience you have with each.

3. List extracurricular activities you have been involved in and indicate if you feel qualified to direct these:

4. Related Professional Activities and/or Job Related Skills:

## VI. GENERAL INFORMATION:

1. Are you currently under contract with another school district? Yes ☐ No ☐

   If yes, where? _____ Present position: _____

   If under contract, can you be released to another position? Yes ☐ No ☐

2. Have you ever been discharged or asked to resign from a position? Yes ☐ No ☐
   If yes, explain below or attach a sheet offering further explanation.

3. Have you ever been convicted of a crime in Minnesota or any other state? The term crime includes a misdemeanor, gross misdemeanor, or felony, or a charge that resulted in a stay of imposition of sentence. Yes ☐ No ☐
   If yes, explain action, location(s), dates, and the agency involved in the space below or attach a sheet offering further explanation.

4. Have you ever been convicted, acquitted or found not guilty of a criminal offense that involved sexual conduct, homicide, assault or any other crime involving violence in Minnesota or any other state? Yes ☐ No ☐
   If yes, explain action, location(s), dates, and the agency involved in the space below or attach a sheet offering explanation.

5. Are there any criminal charges or proceedings pending against you in Minnesota or any other state? Yes ☐ No ☐
   If yes, explain action, location(s), dates, and the agency involved in the space below or attach a sheet offering explanation.

6. Have you ever served in the United States Armed Forces? Yes ☐ No ☐ If yes, Branch: _____

## PURPOSE

- In accord with M.S. 15.165, the Paynesville Area School District No. 741 hereby states that its purposes for collecting personal data are: (1) to enable fulfillment of its obligations to employees, both potential and actual, in accord with state and federal laws; and (2) to enable proper, effective and efficient administrative and supervisory decisions concerning the welfare of the personnel and the school district.

- The applicant has no legal obligation to supply either the data requested in this application form or the data contained in a professional credentials file. The consequences of not providing adequate and vital data, however, minimize the candidate's opportunity for employment since the process would be operating without the information required for a personnel decision.

**PLEASE READ EACH OF THE FOLLOWING STATEMENTS CAREFULLY. YOUR SIGNATURE MEANS THAT YOU UNDERSTAND AND AGREE WITH THE STATEMENTS AS PRINTED.**

1. I hereby affirm that the information provided on this application is true and complete to the best of my knowledge.

2. I further affirm my knowledge and agreement that falsified information or significant omission, either on the application or during an interview, may (a) disqualify me from further employment consideration, or (b) constitute statutory grounds for immediate discharge.

3. CONSENT TO REQUEST FOR INFORMATION
   I hereby authorize the Paynesville Area Schools to contact any or all previous employers, references, or other sources of data listed in this application or derived therefrom as it deems reasonably necessary to arrive at an employment decision.

4. CONSENT TO RELEASE OF DATA
   I hereby authorize any and all previous employers, references, or other sources of data listed in this application or derived therefrom to release and provide to the Paynesville Area Public Schools any and all requested data which the Paynesville Area Schools deems reasonably necessary to arrive at a decision regarding my employment.

**Date** _____ **Signature** _____