

Discovery Kids Application Form Benson Community Education

1400 Montana Avenue, Benson, MN 56215 Phone: 320-843-4545 Fax: 320-843-2262

(Revised 8/2017)

| Name | | | | | | | Date | | |
|---|---|--|-----|---|--------|----------------------------------|-------|----------------------|--------|
| Address | | | | | | | | | |
| City | St | | ate | | Zip | | Phone | | |
| E-mail Ad | E-mail Address | | | | l | | | Are you 18 or older? | |
| | Employment Desired | | | | | | | | |
| What position are you applying for? Please reference "Staff Requirements" to ensure you have the qualifications needed for each of these positions. Please call Community Education for any clarification. □ Director □ Teacher □ Assistant Teacher □ Aide | | | | | | | | | |
| | | | | Euu | Cation | and Training | | | _ |
| _ | High School Years Completed | | | | | High School Diploma or GED | | | |
| Post-Secondary Years Completed | | | | | | Post-Secondary Diploma/Degree | | | |
| Trade/Vocational Years Completed | | | | | | Trade/Vocational Diploma/Degree | | | |
| Special Co | Special Certifications/Licenses or Qualifications | | | | ns | | | | |
| List additional skills or training, knowledge, experience, or other relevant qualifications you consider applicable to obtaining the position desired | | | | | | | | | |
| List an computer programs you are trained in | | | | | | | | | |
| | College or University Name | | | | | Majo | or | Minor | Degree |
| 1. | 1. | | | | | | | | |
| 2. | 2. | | | | | | | | |
| File Folder Number | | | | Year License Expir | | Expires | | | |
| Are you bi-lingual? | | | | If yes, please list what language(s), that you speak (other than English) | | | | | |

Employment History

2.

3.

1.

Employer Name

| Employer Address | | | | | | | |
|--|--------------------|-------------------|----|--|--|--|--|
| Employer Phone | | | | | | | |
| Supervisor Name | | | | | | | |
| Supervisor E-mail | Supervisor E-mail | | | | | | |
| Date of Employment | Date of Employment | | | | | | |
| Position | | | | | | | |
| Description of Duties | | | | | | | |
| Why did you leave your last job? | | | | | | | |
| <u>Veteran Status</u> | | | | | | | |
| Are you a veteran? (yes or no) | | | | | | | |
| Are you a disabled veteran? (yes or no) If yes, please attach a copy of Form DD214. | | | | | | | |
| | | | | | | | |
| | | <u>References</u> | | | | | |
| Name | 1. | 2. | 3. | | | | |
| | | | | | | | |
| Address City, State, Zip | | | | | | | |
| | | | | | | | |
| City, State, Zip | | | | | | | |

| Criminal Background Information | | | | | |
|--|---|--|--|--|--|
| Have you ever been charged with | a misdemeanor or a felony? | | | | |
| If yes, explain the nature of the charge and the circumstances | | | | | |
| Were you convicted and/or did yo | u plead guilty? | | | | |
| If yes, give the date, city, state, and county where convicted | | | | | |
| | ackground check on individuals upon making a contingent job offer. No offer of of the results of the criminal background check from the BCA, the content of which is wal by the School Board. | | | | |

Certification, Acknowledgment and Release

I certify the answers I have given on this application are true and correct to the best of my knowledge. I understand any false or misleading information provided, and any omission or concealment of facts, will disqualify me from consideration for employment, and constitutes grounds for my immediate dismissal should I be employed by the Benson Public Schools ISD #777.

I understand, acknowledge, and agree that no offer of employment is valid or binding until formal approval by the School Board and until such approval the Benson Public Schools ISD #777 shall not be liable for any reliance on any oral or written offers of employment made to me.

In connection with this application, I hereby authorize any and all former employers and references named in this application or any agent of such a former employer, to release to Benson Public Schools ISD #777 and its agents any and all information regarding my job performance and fitness/qualifications to perform the position I am presently seeking and any other employment or related information, both public and private, in their possession. I understand that Benson Public Schools ISD #777 will use this information to determine my fitness/qualifications for the position I am seeking. This authorization expires one year from the date of my signature, below. I hereby release Benson Public Schools ISD #777 and all former employers and references listed herein and any and all agents acting on behalf of said School District, former employers or references, for any and all liability of whatever nature by reason of requesting or providing such information.

| I AGREE (yes or no) | | | |
|---------------------|--|------|--|
| Signature | | Date | |

Also Attach:

Resume Letter of Application

Send to:

Benson Community Education 1400 Montana Avenue Benson, MN 56215