

**SCHOOL DISTRICT OF KEWASKUM**

1455 School Street - P.O. Box 37

Kewaskum, WI 53040

(262) 626-8427 - FAX: (262) 626-2961

**Date of Application**

**TEACHER APPLICATION**

Last Name		Maiden Name/Previous Name (if applicable)		
First Name		Middle Name		
Present Address		City	State	Zip Code
Permanent Address		City	State	Zip Code
Home Telephone (with area code)	Cell Phone (with area code)		Email Address	
Date of Birth (MM-DD-YY)	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male		Social Security Number	
Position Applying For		Available Start Date	Are you currently under contact? If so, explain	

Have you previously filed an application with this school district? If so, on what date and what position?

**TEACHER CERTIFICATION**

AREAS OF CERTIFICATION			
Grade/Subject	State Issuing License	Expires: Mo./Yr.	Wisconsin DPI Code Number

**EDUCATIONAL PREPARATION AND TRAINING**

HIGH SCHOOL:

LOCATION:

Date of Graduation:

Name and Location of University	Dates Attended Mo./Yr. - Mo./Yr.	Degree	Grade Point Average	Major	Minor

Number of Graduate Credits Beyond Bachelor's Degree

Number of Graduate Credits Beyond Master's Degree

**PROFESSIONAL/EDUCATIONAL EXPERIENCE**

**EXPERIENCE UNDER CONTRACT** (List Most Recent First – Attach a sheet if more space is needed for professional experience)

Dates (Mo/Yr) From - To:	District	Grade Level Or Subject	Position	Reason for Leaving
REFERENCE: Name:		Title:	Telephone (with area code):	

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REFERENCE: Name:		Title:	Telephone (with area code):	

Dates (Mo/Yr) From - To:	District	Grade Level Or Subject	Position	Reason for Leaving
REFERENCE: Name:		Title:	Telephone (with area code):	

**STUDENT TEACING OR PRACTICUM EXPERIENCE**

**Complete only if you have less than three years of experience in a contract position**

Dates (Mo/Yr) From - To:	District	Grade/Subject Taught
Cooperating Teacher:	School Address	Telephone:

Dates (Mo/Yr) From - To:	District	Grade/Subject Taught
Cooperating Teacher:	School Address	Telephone:

Dates (Mo/Yr) From - To	District	Grade/Subject Taught
Cooperating Teacher:	School Address	Telephone:

**OTHER WORK EXPERIENCE**

Dates (Mo/Yr) From - To	Name of Organization	Location City State	Job Position	Reason for Leaving

**Extra-Curricular Activities:** List those activities that you are able and qualified to direct:

**PERSONAL STATEMENT**

Prepare a statement to include any experience or talent which in your estimation will contribute to your success in the position or which you are making application, such as: scholastic distinctions, travel, community service or activities, foreign language skills, musical or artistic talent, athletic achievement, coaching, journalism, dramatics, etc.

**RELEASE OF INFORMATION WAIVER**

My signature below authorizes the school district to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, medical records and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the School District of Kewaskum and the reference source from any liability in connection with its release or use.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission, false answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

The School District of Kewaskum does not discriminate on the basis of sex, race, national origin, ancestry, religion, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional or learning disability or handicap or other basis prohibited under state or federal law