

6. Have you ever been terminated from employment or resigned by request of the employer or by mutual consent for the cause of alleged misconduct, alleged unsatisfactory performance, or alleged improper or illegal acts?

_____ Yes _____ No If yes, Employer/Location: _____
 Name/Title of Supervisor: _____

7. Are any criminal charges or proceedings pending against you?

_____ Yes _____ No If yes, explain _____

EDUCATIONAL BACKGROUND: (Please complete entire section)

	Name/Location of School	Major	Minor	Degree (e.g. BA/MA)	Date of Degree
High School					
College/University					
Graduate Work					

What type of teaching certificate do you hold? _____

Expiration date: _____ Certificate file folder number: _____

List the subject(s) or grade(s) specifically stated in your certificate: _____

Major(s): _____ Minor(s): _____

Minnesota Teachers Retirement Association Number: _____

Circle/highlight any of the following activities you would be willing to successfully direct:

Clubs	Cheerleading	Drama	Football	Basketball	Baseball
Track	Golf	Wrestling	Dance Team	Prom	Yearbook
Softball	Student Council	Speech	Volleyball	Cross Country	Soccer

TEACHING EXPERIENCE:

Please list your current or most recent employer first:

1. Employer: _____
Number of Years Employed: _____
Type of Experience: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: (____) _____ Beginning Salary: _____ Ending Salary: _____
Supervisor: _____
Why did you leave? _____
2. Employer: _____
Number of Years Employed: _____
Type of Experience: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: (____) _____ Beginning Salary: _____ Ending Salary: _____
Supervisor: _____
Why did you leave? _____
3. Employer: _____
Number of Years Employed: _____
Type of Experience: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: (____) _____ Beginning Salary: _____ Ending Salary: _____
Supervisor: _____
Why did you leave? _____

OTHER EXPERIENCE:
(You may include volunteer and military service)

Name of Employer: _____
Location: _____
Type of Work: _____
Number of Years Employed: _____

REFERENCES: List three professional references who have knowledge of your work qualifications. Do not list personal references.

<u>Name</u>	<u>Title/Position</u>	<u>Address</u>	<u>Telephone</u>
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INFORMED CONSENT

**Independent School District 239
1000 Pine Meadows Lane
PO Box 627
Rushford, MN 55971
507-864-7785**

Date: _____

I hereby authorize the Rushford-Peterson School District and/or their agents, without any reservation, to investigate my background as it pertains to employment history and performance, personal and professional references, education history, licenses and information contained in public records, including, but not limited to, credit, criminal, motor vehicle data and workers compensation. I hereby release all persons, companies or other entities furnishing such information from liability and responsibility in connection herewith. I further authorize ongoing procurement of the types of reports mentioned herein at any time during my employment (or contract) with the company. A photocopy of this document may be substituted for the original.

Printed Full Name of Applicant: _____

Signature of Applicant: _____

Date: _____

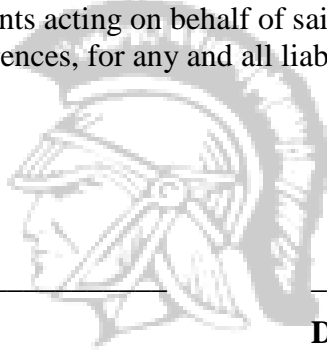
APPLICANT'S STATEMENT

I certify that the answers I have given on this application and other documents related to my application for employment are true and correct to the best of my knowledge. I understand that any false or misleading information provided, or 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 School District.

I understand, acknowledge and agree that no offer of employment is valid or binding until it has been formally approved by the School Board and that until such approval occurs the School District shall not be liable for my reliance on any oral or written offers of employment made to me.

In connection with this application, I hereby authorize any and all of my current and former employers, organizations where I have volunteered ("volunteer organizations") and references named in this application, or any agent of such a former employer or volunteer organizations, to release to the School District 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 the School District 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 the School District and all of my current and former employers, volunteer organizations and references listed herein and any and all agents acting on behalf of said School District, current and former employers, volunteer organizations or references, for any and all liability of whatever nature by reason of requesting or providing such information.



Signature of Applicant

Date