



**MISSION STATEMENT**

The Mission of the Mosinee School District is to improve student progress academically and socially, preparing them to be productive members of a multicultural society; promote partnerships with the community to create multiple opportunities for learning; and foster life-long learners who are self-motivated with the adaptability for future change.

591 West State Highway 153 • Mosinee, Wisconsin 54455  
 Telephone: (715) 693-2530 Fax: (715) 693-7272 Website: www.mosineeschools.org

# MOSINEE SCHOOL DISTRICT SUPPORT STAFF EMPLOYMENT APPLICATION

Date of Application: \_\_\_\_\_

Your personal email address: \_\_\_\_\_

| FOR OFFICE USE ONLY  |  |
|--|--|
| <input type="checkbox"/> W-4<br><input type="checkbox"/> I-9<br><input type="checkbox"/> License<br><input type="checkbox"/> Background Check<br><input type="checkbox"/> Physical | <b>Distribution:</b><br><input type="checkbox"/> MES<br><input type="checkbox"/> MMS<br><input type="checkbox"/> MHS<br><input type="checkbox"/> District Office |

**PERSONAL DATA**

|                |            |                     |     |
|----------------|------------|---------------------|-----|
| LAST NAME      | FIRST      | MIDDLE              |     |
| STREET ADDRESS | CITY       | STATE               | ZIP |
| DAYTIME PHONE  | HOME PHONE | SOCIAL SECURITY NO. |     |

**POSITION(S) DESIRED**

***PLEASE NOTE: The Mosinee School District does not accept general applications.  
 You must apply for a specific position when open.  
 Applications for substitute positions are always welcome.***

Position you are applying for: \_\_\_\_\_

If you are not hired for this position, would you consider subbing?  Yes  No

Please check all positions and locations you are interested in subbing for:

Secretarial  
  Assistant  
  Food Service  
  Custodial  
 Summer Employment:  Summer School  
  Summer Student Labor  
 All Buildings  
  Mosinee Elementary School  
  Mosinee Middle School  
  Mosinee High School  
  District Office

**EDUCATION AND TRAINING**

|                      | NAME OF SCHOOL, CITY, STATE | AREA OF STUDY | NO. OF YRS. COMPLETED | DID YOU GRADUATE? | DEGREE |
|----------------------|-----------------------------|---------------|-----------------------|-------------------|--------|
| HIGH SCHOOL          |                             |               |                       |                   |        |
| COLLEGE/UNIVERSITY   |                             |               |                       |                   |        |
| VOCATIONAL/TECHNICAL |                             |               |                       |                   |        |
| OTHER EDUCATION      |                             |               |                       |                   |        |

What special training or abilities do you possess or experiences have you had that qualify you for this position? (Example: computer/word processing experience, typing speed, etc.)

**EMPLOYMENT HISTORY** Please provide the following information of your last four (4) employers, assignments or volunteer activities, starting with the most recent.

|   |    |  |               |
|---|----|--|---------------|
| FROM  | TO | EMPLOYER   | TELEPHONE NO. |
| STARTING JOB TITLE/FINAL JOB TITLE  |    | ADDRESS  |               |
| IMMEDIATE SUPERVISOR AND TITLE  |    | SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES                                      |               |
| MAY WE CONTACT FOR REFERENCE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |    |  |               |
| REASON FOR LEAVING  |    | HOURLY RATE/SALARY<br>START                      PER                      FINAL                      PER |               |

|   |    |  |               |
|---|----|--|---------------|
| FROM  | TO | EMPLOYER   | TELEPHONE NO. |
| STARTING JOB TITLE/FINAL JOB TITLE  |    | ADDRESS  |               |
| IMMEDIATE SUPERVISOR AND TITLE  |    | SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES                                      |               |
| MAY WE CONTACT FOR REFERENCE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |    |  |               |
| REASON FOR LEAVING  |    | HOURLY RATE/SALARY<br>START                      PER                      FINAL                      PER |               |

|   |    |  |               |
|---|----|--|---------------|
| FROM  | TO | EMPLOYER   | TELEPHONE NO. |
| STARTING JOB TITLE/FINAL JOB TITLE  |    | ADDRESS  |               |
| IMMEDIATE SUPERVISOR AND TITLE  |    | SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES                                      |               |
| MAY WE CONTACT FOR REFERENCE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |    |  |               |
| REASON FOR LEAVING  |    | HOURLY RATE/SALARY<br>START                      PER                      FINAL                      PER |               |

|   |    |  |               |
|---|----|--|---------------|
| FROM  | TO | EMPLOYER   | TELEPHONE NO. |
| STARTING JOB TITLE/FINAL JOB TITLE  |    | ADDRESS  |               |
| IMMEDIATE SUPERVISOR AND TITLE  |    | SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES                                      |               |
| MAY WE CONTACT FOR REFERENCE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO |    |  |               |
| REASON FOR LEAVING  |    | HOURLY RATE/SALARY<br>START                      PER                      FINAL                      PER |               |

**COACHING EXPERIENCE**

| SPORT | ORGANIZATION NAME AND ADDRESS | TELEPHONE NUMBER | FROM | TO |
|-------|-------------------------------|------------------|------|----|
|       |                               |                  |      |    |
|       |                               |                  |      |    |
|       |                               |                  |      |    |
|       |                               |                  |      |    |

**REFERENCES** Please list four (4) people who are not related to you, whom you have known for at least one year.

|   | NAME | JOB TITLE/POSITION | COMPANY NAME/ADDRESS | DAY TELEPHONE | (HOW KNOWN) RELATIONSHIP | HOW LONG KNOWN |
|---|------|--------------------|----------------------|---------------|--------------------------|----------------|
| 1 |      |                    |                      |               |                          |                |
| 2 |      |                    |                      |               |                          |                |
| 3 |      |                    |                      |               |                          |                |
| 4 |      |                    |                      |               |                          |                |

**SUMMARY**

I am applying for this position because: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**READ AND SIGN**

Do you have a valid Wisconsin driver’s license?  Yes  No

Have you ever been convicted of a misdemeanor or felony other than a minor traffic offense?  Yes  No If yes, please explain:

\_\_\_\_\_

*Note: A criminal record does not constitute a bar to employment, unless it is substantially related to the job in question.  
If the job for which you are applying requires that you operate a motor vehicle, include traffic convictions.*

Is there any additional information regarding your name, necessary for us to conduct a record check?  Yes  No If yes, please explain:

\_\_\_\_\_

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 reference, medical records, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and the reference source from any liability in connection with its release or use.

I understand that the school district is committed to maintaining a drug-free workplace. I am aware that the school district may require a drug test as a part of the hiring process or during employment. I understand and agree that possession of illegal or illicit substances shall be grounds for failure to employ or for my discharge should I become employed by the school district.

If employed, I agree to comply with all the rules and regulations of the Mosinee School District. I also understand that employment is subject to satisfactory investigation of this application and a favorable physical examination report, including a chest x-ray or tuberculin test. A physical examination will be performed only after an offer of employment has been made. Further, a job offer will not be withdrawn based on the results of the physical examination unless the examination reveals a job-related reason why the applicant may not be hired by the Mosinee School District.

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, or false 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.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*The Mosinee School District shall not discriminate on the basis of race, religion, creed, political affiliation, physical, mental, emotional, learning, or other disabilities, sex, sexual orientation, age, national origin, citizenship, marital or parental status, ancestry, color, arrest or conviction record, membership in the National Guard, state defense force or any other reserve component of the military forces of the United States or Wisconsin, or any other reason prohibited by state or federal law.*