Holdingford Public Schools Licensed Staff Employment Application PO Box 250 Holdingford, MN 56340 320-746-4307

This application will remain active for no longer than 6 months. All job openings will be advertised regardless of whether or not active applications are on file. Applications in the absence of an advertised job opening will not enjoy a higher or lower priority than those received as a result of the advertisement of a particular job opening. Recommendations are made to the school board on the basis of qualifications. The school board remains the final authority in all matters related to hiring.

Preliminary job screening will include an evaluation of this application form along with any additional information you may wish to provide in the form of a resume, placement file, letters of recommendation, or similar documentation.

| NAME | PHONE # |
|------------------|---------|
| MAILING ADDRESS | |
| EMAIL ADDRESS | |
| TODAY'S DATE | |
| POSITION DESIRED | |

EDUCATION HISTORY

| College/University | Diploma/Degree Received | | | |
|--------------------|-------------------------|--|--|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

EMPLOYMENT HISTORY

| Employer: Name & City | Type of Work | How Long Worked | Reason Left | Last Wage |
|-----------------------|--------------|-----------------|-------------|-----------|
| | | | | |
| | | | | |
| | | | | |

REFERENCES; Name 4 people that have known your work abilities for at least 1 year. Do not list relatives.

| Name | City | Phone # | Occupation or why listed here |
|------|------|---------|-------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

□ I hereby give permission for Holdingford Schools to contact my current/former employer/s.

I hereby certify that all the questions are correctly and truthfully answered and I authorize Holdingford Public Schools to contact my former employers and references regarding my character and qualifications. I understand that any misleading or untruthful statements will render this application void, and if employed, would be just cause for immediate dismissal. I further certify that I am not a habitual user nor addicted to drugs or alcohol. I also understand that I may attach other documentation such as resumes, letters of recommendation and placement files to this application.

Veteran's Preference: If you are a veteran and wish to claim veterans' preference, you must present a legible photo copy of your "DD214" (notice of discharge) to be attached to this application.

| Do you wish to claim Veteran's Preference? | Yes | No |
|--|-----|----|
| | | |
| | | |

 Applicants Signature
 Date

FMLA regulations require all employers to post the updated FMLA notice.

AFFIRMATIVE ACTION/EQUAL OPPORTUNITY EMPLOYER Committed to Workforce Equity, Diversity and Inclusion

Holdingford Public Schools, District 738 does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups.