## Application For Employment

If Yes, please explain

Underwood Community Schools P.O. Box 130 Underwood, IA 51576

It is the policy of the Underwood Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity, and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact the district's Equity Coordinator, Mr. Andy Irwin, Superintendent, 601 3rd Street, Underwood, IA 51576, (712) 566-2332, airwin@underwoodschools.org.

(PLEASE PRINT) Position(s) Applied For Date of Application How Did You Learn About Us? **O** Advertisement **OFriend** OWalk-In OEmployment Agency O Relative O Other Last Name First Name Middle Name Address Number Street City State Zip Code Telephone Number(s) **Email Address Social Security** Number If you are under 18 years of age, can you provide required proof of your eligibility to work? O Yes O No Have you ever filed an application with us before? O Yes O No If Yes, give date O Yes Have you ever been employed with us before? O No If Yes, give date Are you currently employed? O No O Yes May we contact your present employer? O No O Yes Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? O Yes O No Proof of citizenship or immigration status will be required upon employment. On what date would you be available for work? O Full Time O Part Time O Shift Work Are you available to work: O Temporary Are you currently on "lay-off' status and subject to recall? O Yes O No O Yes O No Can you travel if a job requires it? **OYes** Have you been convicted of a felony within the last 7 years? O No Conviction will not necessarily disqualify an applicant from employment.

## **Education**

		Elementary School	High School	Undergraduate College/University	Graduate/ Professional
School Name	and Location				
Years Comple	ted				
Diploma/Degr	ee				
Describe Cour	se of Study				
Describe any straining, appreskills and extra activities  Describe any have received	nticeship, a-curricular				
State any additional information you be helpful to u considering you application	ou feel may s in our				
I	ndicate any	foreign langua		ak, read and I or wi	rite
	FLU	JENT	GOOD		FAIR
SPEAK					
READ WRITE					
You may exclude me other protected stat	embership which wou	ess or civic activitie		igion, creed, age, sexual orienta	tion, gender identity or
you and are  1.  2.	address and not previous	employers.		erences who are no	
ave you eve	r had any jo	b-related trainir	•	States military? O	

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

O Yes O No

## **Employment Experience**

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

Employer	Dates Employed	Work Performed		
	From To	work Performed		
Address				
Telephone Number(s)	Hourly Rate/Salary	-		
	Starting Final			
Job Title Supervisor				
Reason for Leaving				
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Employer	Dates Employed	W 1 D C 1		
	From To	Work Performed		
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Telephone Number(s)	Hourly Rate/Salary			
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Reason for Leaving				
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Job Title Supervisor				
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Reason for Leaving				
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If you need additional space	e, please continue on a se	parate sheet of paper.		
ecial Skills and Qualifications				
nmarize special job-related skills and qua	alifications acquired from emp	loyment or other experience.		
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## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my, application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant	Date

FOR F	PERSONNEL DEPARTMENT USE ONLY		
Arrange Interview OY	Yes O No		
Remarks —			
	JNTERVIE	EWER DATE	
Employed DYes O	1 0		
Job Title	Hourly Rate/ Salary Department		
Ву	NAME AND TITLE	DATE	

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