

MUKWONAGO AREA SCHOOL DISTRICT

385 E. Veterans Way, Mukwonago, Wisconsin 53149 • (262) 363-6300

FAX (262) 363-6272

masdjobs@masd.k12.wi.us

APPLICATION FOR: (Check all that you are applying for)

Building Better
Schools Together

Food Service Custodial Substitute (Fill out page 5 also)

Clerical Instructional Assistant Health Assistant
CPR/First Aid Cert. Required

Name: _____
(Last) (First) (Middle)

DATE: _____ PHONE: _____ CELL PHONE: _____

Is any additional information relative to change of name, use of an assumed name or nickname necessary to enable a check on your work and educational record?

Yes No If Yes, Explain _____

E-MAIL ADDRESS: _____

PRESENT ADDRESS _____
(street) (city) (state) (zip)

MAILING ADDRESS (If different from above)

(street) (city) (state) (zip)

POSITION APPLIED FOR: _____ SALARY YOU WOULD EXPECT: _____

DATE OF AVAILABLE EMPLOYMENT _____

TYPE OF WORK Part Time Full Time Substitute Other

SHIFT PREFERENCE 1st 2nd 3rd Rotating

DAYS AVAILABLE FOR WORK (Circle) MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY
SUNDAY HOLIDAYS

NOTE: Reasonable efforts will be made to accommodate the religious needs of employees regarding Saturday and Sunday work.

EDUCATIONAL RECORD

Grade School Name _____ Location _____

High School Name _____ Location _____

Grade Average _____ Circle Highest Year Completed 1 2 3 4 5 6 7 8 9 10 11 12

Special Courses _____

Other (College) Name _____ Location _____

Trade School Program _____ Completed Yes No

Etc. Grade Average _____ License or Certificate Held _____

EMPLOYMENT EXPERIENCE: In this space account for all time within the past ten years. Include military service and any periods of unemployment.

Give name of most recent employers first:

Employed From To	Employers Name and Location	Position/Salary	Reason for Leaving
____/____	_____	_____	_____
____/____	_____	_____	_____
____/____	_____	_____	_____
____/____	_____	_____	_____

Do you type? _____ Words per min. _____

If you are an experienced operator of any specific software or office machinery please list: _____

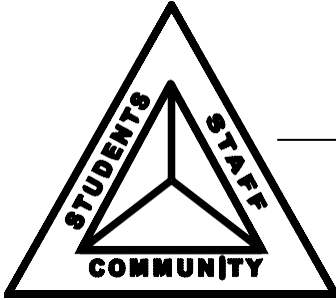
If you are an experienced operator of any plant machinery, kitchen equipment, or have other job related special skills please list: _____

REFERENCES: Give three references, not relatives, who have known you for at least five years whom we may contact. At least one reference must be a former employee or supervisor.

Name	E-mail / Telephone	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

Answer yes or no to each item:

- Do you have any outside responsibilities which would interfere with this job's requirements or work schedule? _____ Yes _____ No
- Are you the subject of any pending criminal charges? _____ Yes _____ No
- Have you ever resigned, been suspended or discharged due to conduct relating to the health, welfare, safety or education of any pupil? _____ Yes _____ No
- Have you ever resigned, been disciplined or dismissed from any position for immoral or unprofessional conduct or for unfitness for services? _____ Yes _____ No



MUKWONAGO AREA SCHOOL DISTRICT
385 E. Veterans Way, Mukwonago, WI 53149

SUBSTITUTE INFORMATION SHEET

NAME: _____

DATE: _____

TELEPHONE NUMBER INCLUDING AREA CODE: _____

I WOULD LIKE MY NAME ADDED TO THE SUBSTITUTE LIST.

Days Available for Work:

Monday Tuesday Wednesday Thursday Friday

Times Available: _____

Areas of Substitute Interest: (Check all that apply):

Clerical Instructional Assistant (LD, CD, ED) Food Service

Custodial Playground Monitor (Elementary Only) Health Assistant
Current CPR/AED & First Training in Required

Comments: _____

Please return this form with your application