

# APPLICATION FOR CERTIFIED PERSONNEL

Runestone Area Education District #61-6014

700 Northside Dr. NE

Alexandria, MN 56308

Phone 320-763-5559/ Fax 320-762-8520

**Data Privacy Notice:**

The information requested on this application may be used by the Education District in determining suitability for employment for the position which you are currently seeking or may seek in the future. You are not legally required to provide any of the information on this form at this time. However, failure to provide complete, accurate information may result in the Education District being unable or unwilling to offer employment to you. With respect to any special accommodations necessary for completing your application or the interview process, the Education District may be unable to provide the necessary accommodations if you do not provide the requested information. The information on this application which is classified as private data under the Minnesota Government Data Practices Act will not be released outside the Education District without your consent except as necessary for tax purposes or as otherwise required by state or federal law.

<b>P E R S O N A L</b>	Last Name <span style="float: right;">First</span>		Current Date
	Street Address		Home Telephone
	City, State, Zip		Work Telephone
	Position Desired:		Social Security Number
	Are you legally eligible for employment in the United States?		
	Do you have any special needs, which may necessitate accommodations in the application/interview process? Yes _____ No _____ If yes, please describe the type of accommodation requested: _____ _____		

<b>E D U C A T I O N</b>	SCHOOL	NAME AND LOCATION OF COLLEGE	DEGREE & CREDITS EARNED	DATES ATTENDED	GRADUATION DATE
	College				
	College				
	College				

STUDENT TEACHING	School and Location	Telephone Number
	Grade or Subject Taught	Name of Supervisor
	School and Location	Telephone
	Grade or Subject Taught	Name of Supervisor

LIST ALL TEACHING EXPERIENCE	School Name and Location	Telephone Number
	Grade or Subject Taught	Dates of Employment
	Name of Supervisor	Regular or Part time
	School Name and Location	Telephone
	Grade or Subject Taught	Dates of Employment
	Name of Supervisor	Regular or Part time
	School Name and Location	Telephone
	Grade or Subject Taught	Dates of Employment
	Name of Supervisor	Regular or Part time
	School Name and Location	Telephone Number
	Grade or Subject Taught	Dates of Employment
	Name of Supervisor	Regular or Part time

If additional space is needed for listing working experience, please attach a separate piece of paper with this information.

O T H E R  W O R K  E X P E R I E N C E	Employer Name	Telephone Number
	Address	Dates of Employment
	Name of Supervisor	State Job Title
	Employer Name	Telephone
	Address	Dates of Employment
	Name of Supervisor	State Job Title
	Employer Name	Telephone
	Address	Dates of Employment
	Name of Supervisor	State Job Title

**LICENSURE:** List current license(s) or certificate(s) relevant to the position for which you are applying:  
License Number                      Issued By    Date                      Expiration

*All applicable licenses or certifications must be received in the District Personnel Office prior to employment.*

**REFERENCES**

These should be people in a position to discuss your qualifications for the position you seek. Include especially principals, directors, or heads of departments under whom you have worked. Indicate any that are related to you. The Education District reserves the right to contact all prior employers, educational institutions or institutions where you have volunteered in addition to references listed below.

Name of Reference: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Reference: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

Name of Reference: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Title: \_\_\_\_\_

Give here any additional information, which you believe will assist in arriving at a true estimate of your qualifications:

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**CRIMINAL BACKGROUND INFORMATION**

Have you ever been charged with a misdemeanor or a felony(Local, State or Federal)? Yes No

If yes, state the specific crime convicted of, the sentence, a description of the circumstances, date of conviction, state, city, and county where convicted.

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Legislation was enacted during the 1995 legislative session that requires School Districts to request a criminal history background check on all individuals who are offered employment in the school. A fee will be charged to all individuals who are offered employment in the education district. Employment will be based on the results of the background check.

**Certification, Acknowledgment and Release:**

I certify that the answers I have given on this application 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 District.

In connection with this application I hereby authorize any and all former employers and references named in this application, or any agent of such a former employer, to release to Runestone Area Education District #61-6014 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 Runestone Area Education District #61-6014 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 Runestone Area Education District #61-6014 and all former employers and references listed herein and any and all agents acting on behalf of said District, former employers or references, for any and all liability of whatever nature by reason of requesting or providing such information.

**All statements contained in this application are considered a part of the contract if the applicant is selected. Selection of all employees shall be by the action of the Board of Education upon recommendation of the Executive Director without regard for race, color, sex or creed.**

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**Date**

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**Applicants Signature**

**AN EQUAL OPPORTUNITY EMPLOYER**

“Enhancing Educational Opportunities Cooperatively”  
Alexandria \* Brandon \* Evansville \* Osakis \* Minnewaska Area Schools \* Parkers Prairie

