

**GRANTON AREA SCHOOL DISTRICT**

217 North Main Street, Granton, WI 54436  
Telephone: 715-238-7292 Fax: 715-238-7288

Please submit one application per **VACANT** position that you are applying for. Copies are acceptable. Applications lacking sufficient information will be rejected. It is your responsibility to assure that your application is received or postmarked by the closing date, as required in the position posting. Please be sure to complete both sides of this form. Please note that this application may become a public document after it has been submitted to the Granton Area School District.

If applying for a **VACANT POSITION**, fill in the information in the area below:

Job Title: \_\_\_\_\_ Deadline Date: \_\_\_\_\_

If applying as a **GENERAL APPLICATION**, fill in the information in the area below:

Position(s) you would like to be considered for:

Job Title: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Job Title: \_\_\_\_\_

**SUMMARY OF QUALIFICATIONS**

In the space below, describe briefly the experience, education, training and other factors that qualify you for the position for which you are applying. If you are applying for a vacant position, refer to the competencies that are expected or desired for the position that is vacant. Be sure to provide details of your background on the other side of this application.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMPLETE BOTH SIDES OF THIS APPLICATION FORM**

**PERSONAL INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ County: \_\_\_\_\_

Home Phone (\_\_\_\_)- \_\_\_\_\_ Work Phone: (\_\_\_\_)- \_\_\_\_\_

The following information will be used only if it is directly related to the position or examination for which you are applying:

	YES	NO	NA
1. Are you willing and able to secure a Regular Wisconsin Driver License, if such a license is required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you willing and able to secure a Wisconsin CDL Driver License, if such a license is required?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Have you ever been convicted of a felony?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered "YES" to question number 3, please explain in full: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

I certify that the answers to all of the questions in this application are true and complete to the best of my knowledge. I understand that if this application is not completed in entirety, it may not be processed and I may be automatically disqualified. I understand that I am responsible for the correctness of this application. I also understand that a background check may be required prior to employment, and that, in accordance with the Drug-Free Workplace Program, drug testing may be required. I waive all provisions of law forbidding colleges or universities, which I attended, or past employers, from disclosing any information which they acquired relevant to my employment. I consent that they may disclose such information to the Granton Area School District. I understand that any offer of employment is conditional upon proof of legal authorization to work in the United States as required by the Immigration Reform and control Act.

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

*The Granton Area School District is an equal opportunity employer.*

**EXPERIENCE**

In the areas below, please list your past work experience beginning with your most recent employment, military experience and volunteer work may also be included as employment experience. NOTE: In order to be considered for employment, you must fill in the information below, accurately and completely. You may submit a resume in addition to completing this section.

**EDUCATION**

High School Graduate:  YES  NO

Name and address of High School: \_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Job title: \_\_\_\_\_ Job duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**POST-HIGH SCHOOL EDUCATION**

Including technical college, business school, college, and university

SCHOOL NAME AND LOCATION	MAJOR AREA OF STUDY	TYPE OF DEGREE OR CERTIFICATION
_____	_____	_____
_____	_____	_____
_____	_____	_____

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Job title: \_\_\_\_\_ Job duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list below the specific course work areas at the high school level or beyond relevant to the position for which you are applying. Also indicate the number of courses you have successfully completed in each area: Please submit a transcript for all course work completed for each school listed above.

COURSE WORK AREA	NO. OF COURSES
_____	_____
_____	_____
_____	_____

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Job title: \_\_\_\_\_ Job duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List special equipment or machines that you can operate: \_\_\_\_\_  
\_\_\_\_\_

List computer software in which you have skill, including word-processing, spreadsheet, and database programs. Please indicate the name of the software.  
\_\_\_\_\_  
\_\_\_\_\_

List special clerical skills, including typing and shorthand:  
\_\_\_\_\_ Typing Speed: \_\_\_\_\_ W.P.M.

**IF ADDITIONAL SPACE IS NEEDED, ATTACH EXTRA COPIES TO THIS PAGE**

Are you currently employed?  YES  NO