

ROYALL SCHOOL DISTRICT

1501 Academy Street
Elroy, Wisconsin 53929
1-608-462-2600 Ext 2101
www.royall.k12.wi.us

APPLICATION FOR CERTIFIED TEACHING POSITION

PERSONAL DATA

Name _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip Code)

Phone Number () _____

Race: Hispanic or Latino? Yes, Hispanic or Latino No, not Hispanic or Latino
(Choose only one)
American Indian or Alaska Native Asian
Black or African American Native Hawaiian or Other Pacific Islander White
(Choose one or more. You must select at least one.)

Position For Which You Are Applying: _____

Are You Currently Under Contract? _____ If so, please explain _____

Date Available for Employment in Royall School District: _____

EDUCATIONAL PREPARATION AND TRAINING

High School _____ Location _____ Grad. Date _____

College/University Education (List most recent first) Name/Location of School	Dates Attended mo./yr. - mo./yr.	Degree	Gr. Pt. Ave. Scale

PARTICIPATION IN EXTRA CURRICULAR ACTIVITIES

College: _____

High School: _____

PROFESSIONAL EXPERIENCE (List Most Recent First)

Dates (mo./yr.) From: To:	District	Grade Level or Subject	Position	Reason for Leaving
Dates (mo./yr.) From: To:	District	Grade Level or Subject	Position	Reason for Leaving
Dates (mo./yr.) From: To:	District	Grade Level or Subject	Position	Reason for Leaving

PROFESSIONAL REFERENCES

Name	Address	Business or Profession	Phone
1. _____			
2. _____			
3. _____			

PERSONAL STATEMENT

Prepare a hand-written statement to include teaching experiences or talent, which in your estimation, will contribute to your success in the position for which you are making application.
(Use additional sheets if needed)

In accordance with Public Act No. 94-221 please answer the following questions by checking the appropriate box: Criminal charges or convictions are not an automatic bar from employment. The district will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position applied for.

Have you ever been convicted of a felony or any other criminal offense, either within or outside the State of Wisconsin? ____ Yes ____ No

If so, identify the approximate date, location and nature of each such conviction on a separate sheet of paper and attach to this application.

Are any criminal charges currently pending against you either within or outside the State of Wisconsin? ____ Yes ____ No

If so, identify the jurisdiction in which such charges are pending, the nature of the charges and give an explanation on a separate sheet of paper and attach to this application.

Are you currently enrolled in a program of deferred adjudication (e.g., accelerated rehabilitation, pre-trial drug or alcohol education)? ____ Yes ____ No

If so, identify the jurisdiction in which such charges are pending, the nature of the charges and give an explanation on a separate sheet of paper and attach to this application.

Have you ever been dismissed, asked to resign, or non-renewed from employment? ____ Yes ____ No

If yes, provide an explanation on a separate sheet of paper and attach to this application. Give the name of employer, the date and reasons.

For Use Only For Criminal Background/Driving Record Check:

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Driver License # _____

In accordance with Public Law No. 91-508 we are required to advise you of the following: Public Law 91-508 requires that we advise you that inquiries may be made during our processing of this application to obtain information concerning your character, general reputation, personal reputation, personal characteristics and mode of living. Upon written request, additional information as to the nature and scope of any such inquiries will be provided.

I authorize all persons and entities to supply any information regarding my background and former employment to the Royall Board of Education and its agents and employees and hereby release the same and any such persons or entities from any liability arising from the supplying and use of such information.

My signature below certifies that all statements made on this application are true and complete to the best of my knowledge. If employed by this school district, I understand that any misrepresentation of factual information contained herein, may be cause for my dismissal.

Signature

Date

Royall School District does not discriminate in employment, program opportunities, or delivery of services.

Revised 5/1/2012

For District Office Use Only:		_____ WI Court System
		_____ WI Criminal History Background Check
_____	_____	_____
Date	Initials	Search Number

