

**Sioux Valley School District 5-5
 PO Box 278
 200 Hansina Ave
 Volga SD 57071**

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or disability.

PERSONAL

Last name	First	Middle	Date
Street Address			Home Phone
City, State, Zip			Business Phone
Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: month and year			
Position Desired			
How did you learn of our opening?			

Males born after December 31, 1959, are required to register for Selective Service. Are you registered? Yes No If yes: Selective Service number: _____ (If you do not know your Selective Service number, you can obtain it by calling 1-847-688-6888.)

EDUCATION

School	Name & Location of School	Course of Study	# of Years Completed	Did you Graduate	Degree
College	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
High School	_____	_____	_____	_____	_____
Grade School	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____

Teaching or Administrative Certificate (i.e.: elementary, middle school, junior high, secondary):

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

1. Name	Telephone () -
Address	Employed (Month/Year) From To
Name and Title of Supervisor	
State Job Title & Describe Your Work	
Reason for leaving	

2. Name	Telephone () -
Address	Employed (Month/Year) From To
Name and Title of Supervisor	
State Job Title & Describe Your Work	
Reason for Leaving	

3. Name	Telephone () -
Address	Employed (Month/Year) From To
Name and Title of Supervisor	
State Job Title & Describe Your Work	
Reason for Leaving	

4. Name	Telephone () -
Address	Employed (Month/Year) From To
Name and Title of Supervisor	
State Job Title & Describe Your Work	
Reason for Leaving	

We may contact the employers listed above unless you indicate those you do not want us to contact. Do not contact employer	
number(s)	Reason

Check the extra-curricular activities you are qualified to supervise:

<input type="checkbox"/> Sports Timer	<input type="checkbox"/> Athletic Director	<input type="checkbox"/> Football	<input type="checkbox"/> Basketball
<input type="checkbox"/> Wrestling	<input type="checkbox"/> Track	<input type="checkbox"/> Cross Country	<input type="checkbox"/> Volleyball
<input type="checkbox"/> Golf	<input type="checkbox"/> Pep Band/Pit Orchestra	<input type="checkbox"/> Oral Interp	<input type="checkbox"/> Annual
<input type="checkbox"/> Photography	<input type="checkbox"/> Junior Class	<input type="checkbox"/> Concessions	<input type="checkbox"/> FCCLA
<input type="checkbox"/> Vocal Music	<input type="checkbox"/> Pep Club/Cheerleader	<input type="checkbox"/> FFA	<input type="checkbox"/> Drama

Give a brief statement as to why you would like to work at Sioux Valley School.

The information provided in the Application for Employment is true, correct, and complete. I understand that, if I am employed, any misstatement or omission of fact on this application may result in my dismissal.

Date

Signature

All new employees shall be subject to a criminal background check.

The Sioux Valley School District 5-5 does not discriminate in its employment policies and practices, or in its educational programs on the basis of race, color, creed, religion, age, sex, disability, national origin, or ancestry. Inquiries concerning the application of Title VI ,Title IX or 504 are to contact Supt. Laura Schuster at Sioux Valley School, 200 Hansina Ave., Volga, SD 57071, phone 605-627-5657 or to the U.S. Department of Education, Office for Civil Rights , 8930 Ward Parkway, Suite 2037 , Kansas City, Missouri 64114. Phone : 816-268-0550, FAX: 816-823-1404, TDD: 800-437-0833 E-Mail: ocr.KansasCity@ed.gov <<mailto:ocr.KansasCity@ed.gov>> Website: <<http://www.ed.gov/ocr/>>