

www.ldfschool.org **Teacher Application**

PERSONAL DATA

Name				
(Print) Last	First	Middle	Date of A	Application
Address	City		State	Zip
Home Phone	Work Phone		ell Phone	
Email Address	Social Security Nu		mber	
Position for which you are applying:				
Are you currently under contract?	If so, explain			
Date available for employment in this s	school district:			
Date of Birth (Necessary for conducting	g a background check) _			
Is there additional information regardin or previous name)?			onduct a record cl	neck (i.e., alias
Are you a United States citizen or do you	ou have an entry permit	which allows you to	a lawfully work in t	he U.S.?
NOTE: A COMPLETE TRANSCRIPT OF A VALID WISCONSIN DPI LICENSE MUST THE RESPONSIBILITY OF THE APPLICA	BE ON FILE IN THE DISTR	RICT OFFICE AT TH	E TIME OF EMPLO	
	I THIS SPACE – FOR	_		
☐ Contract		Letter of Tempora	ary Employment	
Assignment	Grade(s)/S	Subject(s)		
Additional Salaried Responsibilities	3			
Effective Date	R	eplaces		
Allowed years of teach	ing experience for	years o	f previous exper	ience.
Starting Salary	Date of Ir	nterview		

Applicants who need accommodations in the application and/or interview process are asked to make their request by contacting the Lac du Flambeau School.

PROFESSIONAL/EDUCATIONAL EXPERIENCE
(List Your Experience Under Contract Only with the Most Recent First)

Dates (Month/Year) From To	District	Position	Grade Level/Subject	REASON FOR LEAVING
Reference:Name				
Name	Title		Telephone with Area Code	Э
Dates (Month/Year) From To	District	Position	Grade Level/Subject	REASON FOR LEAVING
Reference:				
Reference:Name	Title		Telephone with Area Code	e
Dates (Month/Year) From To	District	Position	Grade Level/Subject	REASON FOR LEAVING
Reference:			,	
Name	Title		Telephone with Area Code	
Dates (Month/Year) From To	District	Position	Grade Level/Subject	REASON FOR LEAVING
Reference:				
Name	Title		Telephone with Area Code	<u> </u>

TEACHER CERTIFICATION

Areas of Certification

Grade/Subject	State Issuing License	Expires (Month/Year)	Wisconsin DPI Code Number

Other Professional Experiences (Educational travel, lecturing, study, publications, organizations, etc.)

Dates (Month/Year) From To	Name of Organizati Location (City/Stat			Reason for Leaving		
ther Work Experience (Bu	ısiness, summer occ	upations, chu	rch work, socia	al services, rec	reation)	
Dates	Firm or Institution	n Na	ture of Work	Number of Months		
	DUCATIONAL PRI Il College or University				I	
List a				ent First Major(s)	Minor(s)	
List a	Il College or University Dates Attended	/ Education wit	th the Most Rece	ent First Major(s)	Minor(s)	
List a	Il College or University Dates Attended	/ Education wit	th the Most Rece	ent First Major(s)	Minor(s)	
List a	Il College or University Dates Attended	/ Education wit	th the Most Rece	ent First Major(s)	Minor(s)	
List a	Il College or University Dates Attended	/ Education wit	th the Most Rece	ent First Major(s)	Minor(s)	
	Dates Attended Mo/Yr - Mo/Yr	Degree Number o	th the Most Rece	mt Major(s)		

The Lac du Flambeau School District Board of Education, as a condition of employment, requires a certificate of good health signed by a physician (Physical Report), criminal information records check through the Wisconsin Department of Justice and other appropriate agencies, and requires that all final candidates for employment with the Lac du Flambeau School District submit to a drug test.

As part of the application process, the Lac du Flambeau School District will conduct a criminal information records check. (A criminal record does not constitute an automatic bar to employment and will be considered only if the circumstances of the conviction relate to the circumstances of the particular job for which you are being considered.)

Have you ever been convicted of an ordinance violation (other than minor traffic violations), misdemeanor, or felony? Yes No
If yes, please attach a confidential letter explaining the offense(s) including date, location of court, etc.
Please read the following statements carefully before you sign your name.
I understand that this application will remain active for six months. After six months, if I am still interested in a position with the Lac du Flambeau School District, it will be necessary for me to complete a new application form or notify the District Office that I would like to re-activate my original application.
I HEREBY CERTIFY that the answers given to the above questions and statements are true and correct and hereby authorize you to contact references, past or present employers, schools, law enforcement agencies and other sources of information which may be relevant to my application for employment. In consideration of the Lac du Flambeau School District's review of this application, I release from all liability and/or legal claims the Lac du Flambeau School District and every person seeking or providing information, whether it is oral or written A photocopy and/or electronic version of this release shall be as valid as the original and may be relied upon by all persons providing information. It is understood and agreed that any misrepresentation, false statement, or omissions by me on this application will be sufficient reason for rejection of my application or for dismissal at any time during my employment without liability to the Lac du Flambeau School District. I have read, understand, and agree to the above statements. (Please sign below).

An Equal Opportunity Employer

Date

Applicant Signature

The Lac du Flambeau School District does not discriminate in employment on account of race, color, religion, sex, pregnancy, national origin, age, disability, ancestry, marital status, arrest record, conviction record, sexual orientation, national guard/reserve membership and the non-work related use or non-use of lawful products.

The Lac du Flambeau School District is in compliance with the Americans With Disabilities Act.