



Humboldt Community Schools
 23 3rd Street North PO Box 130
 Dakota City, IA 50529

CLASSIFIED APPLICATION FORM

DATE: SOCIAL SECURITY NO.

NAME: EMAIL:

TELEPHONE: STREET ADDRESS:

CITY: STATE: ZIP:

ARE YOU A U.S. CITIZEN? YES NO

ARE YOU LEGALLY ABLE TO WORK IN THE U.S.? YES NO (Proof of work eligibility will be required upon employment.)

Are you able to perform the essential functions of the position with or without accommodations? _____

POSITION DESIRED: DATE YOU CAN START:

- | | |
|--|---|
| <input type="checkbox"/> Custodial and Maintenance Department | <input type="checkbox"/> Teacher Associate |
| <input type="checkbox"/> Transportation Department
(Pre-employment Alcohol and/or Drug Testing is Required) | <input type="checkbox"/> Secretary |
| <input type="checkbox"/> Food Service | <input type="checkbox"/> Other <input type="text"/> |

Describe any experience, skills or qualifications, which you feel would especially qualify you to work for the Humboldt Community School District.

Are you employed now? If so, may we inquire of your present employer?

Were you in the military service between and including any of the following dates : (Check one if applicable)

- | | |
|--|--|
| <input type="checkbox"/> December 7, 1941 to December 31, 1946 | <input type="checkbox"/> August 5, 1964 to May 7, 1975 |
| <input type="checkbox"/> June 25, 1950 to January 31, 1955 | <input type="checkbox"/> August 2, 1990 to date
(Specify dates of service) <input type="text"/> |

Did you receive an honorable discharge?

Have you ever been convicted or plead guilty to child abuse or a related offense? If yes, explain.

Have you ever been convicted or plead guilty to sexual abuse or a related offense? If yes, explain.

Have you ever been convicted or plead guilty to any other crime, excluding minor traffic offenses? (For purposes of this application "convicted" includes a conviction following a trial, a guilty plea, a plea of nolo contendere or no contest, a deferred judgment, and adjudication of guilty or delinquency as a minor.) If yes, explain.

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NOTE: Yes answers to the foregoing questions will not automatically result in your disqualification from consideration for employment. The recency of the criminal offense, the nature of the offense and its relationship to your fitness for the job will be taken into account.

EDUCATION

	Name and Location of School	Years Attended	Date Graduated	Subjects Studied
High School				
College				
Trade Schools or Special Skills				

FORMER EMPLOYERS (List below last three employers, starting with the last one first)

Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

REFERENCES

Name	Address	Telephone No.	Years Acquainted

TRANSPORTATION DEPARTMENT APPLICANTS:

CDL License (Commercial Driver's License) Yes No Type: Passenger Air Brake Class B

Number of traffic violations in the past 5 years Type:

Number of accidents in the past 5 years

Have you ever tested positive for an alcohol or drug test, refused to be tested? If yes, explain:

I (print name) _____ authorize my employers to release the results of any drug or alcohol tests, or any information regarding refusals to be tested, to the Humboldt Community School District.

Date: _____ Applicant's Signature: _____

The facts set forth in my application are true and complete. I understand that if employed, false statements on this application or in any accompanying letter or resume or other application materials may be considered sufficient cause for dismissal. I hereby authorize the Humboldt Community School District or its agents to make an investigation of my employment history, criminal/police records and personal history. I authorize former employers, my references, or any other person or entity contacted by the District or its agents investigating the merits of this application to disclose personnel or criminal/police records, information about my qualifications for the position or any other information relating to my application and release them from any liability for such disclosure.

I also understand that neither this application nor any statement regarding possible employment by an employee of the Humboldt Community School District constitutes a contract of employment. If a contract is to exist, it will be executed in writing by the Humboldt Community School District through signature of the President of its Board of Directors. I understand that this application for employment is valid for no more than one year. After that, I must resubmit an application in order to be considered for positions at the Humboldt Community School District.

Date: _____ Applicant's Signature: _____

"It is the policy of the Humboldt Community School District not to discriminate on the basis of race, creed, color, age (for employment), sex, sexual orientation, gender identity, marital status (for programs), socioeconomic status (for programs), national origin, disability, or religion in its educational programs and employment practices as required by the Iowa Code section 216.7. If you have questions or grievances related to compliance with this policy please contact the Humboldt Community School District, Lisa Thul, Assistant Finance Manager, 23 3rd St N PO Box 130 Dakota City, IA 50529; 515-332-1330, lthul@humboldt.k12.ia.us, or the Iowa Civil Rights Commission, Grimes State Office Building, 400 E. 14th St., Des Moines, IA 50319-1004; phone number 515-281-4121, 800-457-4416; web site: <https://icrc.iowa.gov>, or Director of the Office for Civil Rights U.S. Department of Education, Citigroup Center, 500 W. Madison Street, Suite 1475, Chicago, IL 60661-7204, 312-730-1560-Fax 312-730-1576, OCR.chicago@ed.gov.