

STUDENT EMPLOYMENT APPLICATION

School District of Glenwood City, 850 Maple Street; Glenwood City, WI 54013

If you are 15 or under you will need a work permit, which can be acquired at the MS/HS Office, parent consent is required.

Applicant Name:		Date:
Address:		
Cell Phone:	Email Address:	
Date of Birth:	Social Security No:	
Position Applying For:		
TEACHER REFERENCES: Please li	st three references	Number of hours you can work per week:
Name:		-
Name:		-
Name:		-
		ou, which would substantially relate to the position you escription of the pending charge.
		substantially relate to the position you are applying for . If yes, please give a brief explanatory statement.
Conviction of a crime or arrest is not an automatic the offense, and the relationship between the offense		strict will consider the nature of the offense, the date of a you are applying.
APPLICANT WILL BE OFFERED A JOB. ANY MISRE	PRESENTATION OR WILLFL	NT BY THE DISTRICT DOES NOT GUARANTEE THAT AN JLL OMISSION OF FACTS BY THE APPLICANT ON THIS THE APPLICANT OR TERMINATE THE APPLICANT'S
I certify that all information contained in this applic history and personal reference inquiries to determin		te, and I hereby authorize the District to conduct work yment.
Applicant Signature	gnature	

The School District of Glenwood City does not discriminate on the basis of race, color, national origin, sex, disability, age, marital status, parental status, religion, sexual orientation, creed, and pregnancy in its educational programs and activities and provides equal access to the Boy Scouts, Girl Scouts and other designated youth groups. Ms. Erin Spaeth has been designated to handle inquiries regarding non-discrimination policies. Please send inquiries to: Ms. Erin Spaeth, Director of Student Services, 850 Maple St. Glenwood City, WI 54013, or call 715-265-7120, or email erin.spaeth@gcsd.k12.wi.us.