## RTR PUBLIC SCHOOLS EMPLOYMENT APPLICATION

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

The District does not discriminate on the basis of sex, national origin, race or disability.

Personal Data			
First Name	M.I. Last	Name	
Street Address	City	Sta	ite Zip Cod
Home Telephone Number	Today's Date		
Daytime Telephone Number at which we may	contact you.		
Are you 18 years of age or older? Yes_	No		
How were you referred to RTR Public Schools  college or university  recruiter or agency  employee  advertisement  no referral ~ walk in  other  Position Preferences		e appropriate respo	onse.
For what position are you applying?			
Salary desired: \$ per	(sp	pecify hour, week or	r year)
Schedule desired: Full Time Part T	ime	# of Hours pe	er Week
Could you work overtime? Yes	No		
What date could you start work?		<del></del>	
Could you travel if required by this position?	Yes %	of Time	_

## Education

High School						
School Name:						
City and State:						
Degree or # of Years Completed	Grade Point Average					
College						
School Name:						
City and State:						
Degree or # of Years Completed	Grade Point Average					
Major:						
College						
School Name:						
City and State:						
Degree or # of Years Completed	Grade Point Average					
Major:						
Graduate School						
School Name:						
City and State:						
Degree or # of Years Completed	Grade Point Average					
Major:						
List any credits earned or in progress beyond your current degree:						
List any additional certificates and/or training programs earned or in progress, not included in your formal education:						

List any professional affiliations to which you belong (please do not list activities which would indicate age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief, or disability):									
Previous Employment									
List your current or most recent employment first. Include work-related intern	ships, military and volunteer work.								
Current Employer:									
City and State:									
Telephone Number:									
Supervisor's Name and Title:									
Position Title:									
Reason for Leaving:									
Salary: per Hour Week Month Year	(circle one)								
Dates of Employment: From: To:									
May we contact your employer: Yes No									
Previous Employer:									
City and State:									
Telephone Number:									
Supervisor's Name and Title:									
Position Title:									
Reason for Leaving:									
Salary: per Hour Week Month Year	(circle one)								
Dates of Employment: From: To:									
May we contact your employer: Yes No									
Previous Employer:									
City and State:									
Telephone Number:	<del></del>								
Supervisor's Name and Title:									
Position Title:									

Reason for Leaving:							
Salary:	per	Hour	Week	Month	Year	(circle one)	
Dates of Employment:	From:				To:		
May we contact your employ	yer:	Yes		No	_		
Professional References							
Name/Relationship		Title		Compa	ny	Phone #	Profession
background inquiries may b reports. These reports will i experience along with reaso company may be requesting past activities relating to my companies. I authorize with release all parties involved f RTR Public Schools. This a	cation for e e made or nclude info ons for terr g informati driving, co out reserv from liabilii	employmen or me incluormation mination con from v riminal, ci vation, and ty and res	uding previ as to my c of employn various fed vil, and oth y party or a sponsibility	ous emplo haracter, when the from the control eral, state ther experion agency control for doing	oyers, sch work habi previous of , and othe ences as ntacted to so. I hero	nools, criminal convits, performance, ecemployers. Further agencies which nowell as claims involongments the above by consent to obta	naintain records concerning my lving me in the files of insurance mentioned information and aining the above information from
							not an employment contract nor
can it be used to create one or RTR Public Schools with representations that differ fr	or without	notice. I	acknowle	dge that R			be terminated by the employee made any promises or
							the United States, if I am offered mination of my employment.
	tion to RTI	R Public :					nt agency from all liability with R Public Schools from all liability
I certify that the information misrepresentation has been subsequent employment wit	made by	me verba	ılly or in wı	riting, any	offer of e		lerstand that if any o me may be withdrawn or my
Applicant's Signature							
RETURN APPLICATION	N to:	D.T.D					

RTR Public Schools PO Box 659 Tyler, MN 56178