

SCHOOL DISTRICT OF FORT ATKINSON
APPLICATION FOR INSTRUCTIONAL PERSONNEL

Date _____

PLEASE PRINT OR TYPE

Position for which you are applying: _____

P E R S O N A L	Last Name	First	Middle Initial
	Present Address (Street, City, State, ZIP)		Home Telephone Number ()
	Permanent Address, if different (Street, City, State, ZIP)		Work Telephone Number ()
	Are you currently under a contract for employment with another school board?		____ Yes ____ No
	Have you verbally accepted a contract with another district?		____ Yes ____ No
	If yes, when would you be available if this position were offered to you? _____		
Have you been convicted of a felony? ____ Yes* ____ No			
*If yes, please explain: _____			
*Conviction of a crime is not an automatic bar to employment. The District will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.			

L I C E N S E	Are you currently licensed as a teacher in the State of Wisconsin?		____ Yes* ____ No
	If no, please indicate if you are eligible to receive certification?		____ Yes* ____ No
	*If yes, in which fields? (1) _____	(2) _____	
	(3) _____		(4) _____
	Expiration date of license: _____		
	University or other Placement Office: _____		
It is your responsibility to have your university send your credentials and transcripts.			
Name under which your credentials are listed: _____			

The District does not discriminate in employment on the basis of age, race, color, national origin, sex, religion, or handicap, in accordance with Federal law. In accordance with State law, the District does not discriminate in employment practices on the basis of creed, color, handicap, marital status, sex, national origin, ancestry, genetic information, sexual orientation, religion, arrest record or conviction record, or membership in the National Guard, state defense force, or any other reserve component of the military forces of the United States.

The School District of Fort Atkinson is an EQUAL OPPORTUNITY EMPLOYER

E D U C A T I O N	SCHOOL	NAME AND LOCATION	NUMBER OF YEARS COMPLETED AND/OR DEGREE	MAJORS/MINORS
	University			
	University			
	Post-Graduate			
	Other			

E M P L O Y M E N T H I S T O R Y	EXPERIENCE UNDER CONTRACT			
	Dates Starting And Ending	District or Employer	Position/Subject/Grade	Reason for Leaving
	OTHER WORK HISTORY			
	Dates Starting And Ending	Employer	Position	Reason for Leaving
	STUDENT TEACHING			
	District		Subject/Grade	

R E F E R E N C E S	NAME AND LOCATION	TITLE/POSITION	TELEPHONE NUMBER
			()
			()
			()
			()

Briefly describe the teacher who most influenced your life, and indicate the qualities that caused you to specify this teacher.

ADDITIONAL INFORMATION

Explain any additional experiences, talents or skills that you possess which would be applicable to the position for which you are applying. Also, indicate any interest or ability in supervising co-curricular activities.

AGREEMENT

I hereby certify that the above information to the best of my knowledge is true, accurate, and complete. Any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the District and will be kept active for one year. The District reserves the right to accept or reject this application. I further agree to observe all rules, regulations, and policies of the District.

Signature of Applicant

Date

I hereby authorize the District to conduct work history, personal reference, or police record inquiries to determine my acceptability for employment. Furthermore, I release all parties from liability for any damage that may result from furnishing same to you.

Signature of Applicant

Date

<p>RETURN APPLICATION TO: School District of Fort Atkinson Director of Instructional Services 201 Park Street Fort Atkinson WI 53538-2155 920/563-7802</p>

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INTEGRATION OF TECHNOLOGY IN INSTRUCTION

The School District of Fort Atkinson firmly believes that technology is a tool to be used in the instructional process. The District is committed to the use of technology, not as an end in itself, but rather a vehicle to increase student learning. Please use the following scale in responding:

- Don't Know - I do not understand the question or the technology.
- Know - I personally use this technology.
- Able to teach - I understand it well enough to teach it to others.
- Use with students in the classroom - I am currently integrating this technology with my students.

Name _____

	Don't Know	Know	Able to teach	Use with students	Instructional Example
I understand and can use the basic features of a word-processing program					
I can use advanced features of formatting, layout, and editing in a word-processing program (e.g., spacing, style, fonts, borders, justifying, spell-check, columns)					
I can manipulate graphics, pictures, and tables in a word processing document.					
I can scan, crop, and save a graphic using a scanner or digital camera.					
Using a digital camera or scanner, I can transfer the pictures to a computer, and use the pictures in a computer application.					
I can recognize and solve routine computer hardware and software problems (printing problems, lost files, basic error messages)					
I can describe the operating system, MacOS and Windows, of a computer. (e.g., desktop, file, window, directory, pull-down menu, dialog box).					
I understand and can use a spreadsheet to organize, manipulate, and graph data					
I can design and produce a multimedia program using applications like PowerPoint, Hyperstudio or html.					