SCHOOL DISTRICT OF WEST DE PERE

APPLICATION FOR PROFESSIONAL EMPLOYMENT

400 Reid St, Suite W
De Pere WI 54115
(920) 337-1393
FAX: (920) 337-1398

PERSONAL DATA

NAME _____
(Last) (First) (Middle)

PRESENT ADDRESS _____( )_____
Street City State Zip Phone

PERMANENT ADDRESS _____( )_____
Street City State Zip Phone

SOCIAL SECURITY NUMBER _____ Date of Application _____

POSITION FOR WHICH YOU ARE APPLYING _____

Are you currently under contract? _____ If so, explain _____

_____

Current salary _____ Salary range desired _____
Date available for employment in this school district _____
Have you previously filed an application with this school district? _____
If so, on what date? _____

DO NOT WRITE IN THIS SPACE - FOR ADMINISTRATIVE USE ONLY

☐ Contract ☐ Letter of Temporary Employment

Building Assignment _____ Grade(s)/Subject(s) _____

Additional Salaried Responsibilities _____

Effective Date _____ Replaces _____

Allowed _____ years of teaching experience for _____ years of previous experience.

Allowed _____ graduate credits toward Master's Degree.

Will be placed in the _____ year of mentoring program.

Salary Code _____ Interviewed By _____
Base Salary _____ _____
_____
Date of Interview _____ _____