Early View Academy of Excellence
7132 W. Good. Hope Rd.
Milwaukee, WI. 53223
Phone: 414-793-7416
Website: www.earlyviewk12.org

☐ Teacher
☐ Assistant Teacher
☐ Other: _____

APPLICATION FOR HIRE

(A résumé must be attached to this application.)

PERSONAL INFORMATION

1. Position applying for _____
2. Name (Last, First, Middle, ***Alias/Former***) _____
3. Home Address (Number, Street, City, State, Zip Code) _____
4. Home Telephone Number with Area Code _____
   If you have lived here less than three (3) years, list previous complete address: _____
   _____
5. Work Address (Number, Street, City, State, Zip Code) _____
6. Work Telephone Number with Area Code _____
7. Cell Phone Number with Area Code _____
8. E-mail Address _____
9. Is it permissible to call you are work? ☐ Yes ☐ No
10. Former EVAE employee? ☐ Yes ☐ No
11. Date of Availability? _____ Are you under contract? ☐ Yes ☐ No
    Expiration Date _____
12. Have you filed an application with the Early View Academy of Excellence previously? ☐ Yes ☐ No
13. When was the previous application filed? _____ Under what name? _____
14. Have you **ever** been convicted of any offense, including felonies, misdemeanors, and ordinance violations?
    ☐ Yes ☐ No ***Do not report minor traffic violations***. In the space below, please list the details of each offense, the location, and the disposition of the case (attach additional sheets if necessary). NOTE: Convictions are not an automatic bar to employment but are reviewed in relation to the job for which you applied. Failure to report all convictions as specified on this application may result in rejection of your application or discharge from employment.
    _____

15. Are you currently subject to any pending charge(s), including felonies, misdemeanors, or ordinance violations? ☐ Yes ☐ No ***Do not report minor traffic violations***. In the space below, please list the details of each pending charge, including the specific offense, the date of offense and the location (attach additional sheets if necessary). NOTE: Pending charges are not an automatic bar to employment but are reviewed in relation to the job for which you applied. Failure to report all pending charges as specific on this application may result in rejection of your application or discharge from employment.

_____

16. Have you **ever** been dismissed or asked to resign from any position? ☐ Yes ☐ No
If yes, please explain fully _____

17. Are you related (by blood or marriage) to a current Early View Academy of Excellence Board Member or employee who is an administrator (e.g., principal, assistant principal, program administrator, supervisor, coordinator, staffing specialist, director, assistant director, manager, division/department head, deputy superintendent, the superintendent, chief auditor, director of board governance)? This includes guardianships as well as legal adoptions.

Relationship to that person is defined as follows: father, mother, brother, sister, son, daughter, uncle, aunt, nephew, niece, grandchild, grandparent, first cousin, husband, wife, son-in-law, daughter-in-law, brother-in-law, wife of a brother-in-law, sister-in-law, husband of a sister-in-law, father-in-law, mother-in-law, stepchild, stepparent.

☐ Yes ☐ No If yes, list the individual(s) as well as your relationship to that person or those persons.

_____

18. **EDUCATIONAL AND PROFESSIONAL TRAINING:** List higher institutions attended and other appropriate training in chronological order.

Name and Location of Institution	From Mo. Yr.	To Mo. Yr.	Graduated Mo. Yr.	Degree	Major	Minor

19. What is your current annual salary? $_____

20. **WISCONSIN CERTIFICATION:** Do you hold a Wisconsin license(s) issued by the Department of Public Instruction? Yes _____ No _____

Type of License	Issue Date	Expiration Date

21. **WORK EXPERIENCE:** ***Give a complete record of your full-time work experience***. Indicate most recent experience at top of page, followed by previous experience in chronological order. Use a separate sheet of paper if additional space is needed. You must complete this section in addition to submitting a résumé.

FROM MO. YR.	TO MO. YR.	NO. MONTHS	TITLE OF POSITION	SALARY – STARTING	FINAL
NAME OF EMPLOYER			DUTIES		
ADDRESS					
NAME OF SUPERVISOR/TELEPHONE			REASON FOR LEAVING		
FROM MO. YR.	TO MO. YR	NO. MONTHS	TITLE OF POSITION	SALARY – STARTING	FINAL
NAME OF EMPLOYER			DUTIES		
ADDRESS					
NAME OF SUPERVISOR/TELEPHONE			REASON FOR LEAVING		
FROM MO. YR.	TO MO. YR.	NO. MONTHS	TITLE OF POSITION	SALARY – STARTING	FINAL
NAME OF EMPLOYER			DUTIES		
ADDRESS					
NAME OF SUPERVISOR/TELEPHONE			REASON FOR LEAVING		
FROM MO. YR.	TO MO. YR.	NO. MONTHS	TITLE OF POSITION	SALARY – STARTING	FINAL
NAME OF EMPLOYER			DUTIES		
ADDRESS					
NAME OF SUPERVISOR/TELEPHONE			REASON FOR LEAVING		
FROM MO. YR.	TO MO. YR.	NO. MONTHS	TITLE OF POSITION	SALARY – STARTING	FINAL
NAME OF EMPLOYER			DUTIES		
ADDRESS					
NAME OF SUPERVISOR/TELEPHONE			REASON FOR LEAVING		

22. **PROFESSIONAL REFERENCES:** List references that may provide information about your training and experience.

NAME	POSITION	ADDRESS ZIP CODE	TELEPHONE NO.

23. Please indicate how you became aware of this position _____.

24. **ADDITIONAL INFORMATION:** Please provide any further information about yourself which you feel would be of importance in arriving at a fair evaluation of your qualifications for this position. For example, special strengths, areas where you feel greater growth is needed, your philosophy of education, etc.

I authorize Early View Academy of Excellence to make any inquiry of or receive information from any person or organization regarding my suitability for employment; and do hereby give permission to these persons or organizations to provide such information. Such inquiries may include and not be limited by enumeration to the quality and quantity of my work, work history and record, character, qualifications, criminal records or convictions and medical records. For and in consideration of the release of such information, I hereby forever waive, release, and covenant not to sue any person or organization including Early View Academy of Excellence, its agents, and employees for the result of providing, obtaining, or acting upon such information. I give this waiver, release, and covenant not to sue for myself, my heirs, assigns, and successors in interest forever. I give this waiver, release, and covenant not to sue understanding that the information obtained may be such as to disqualify me for employment. I understand that such information is sought with confidentiality, and I will not request copies of such information. I also certify that all statements made on this application are true and complete, accurate, and not misleading to the best of my knowledge. I understand that any false statements, incomplete statements, or misrepresentations may subject me to disqualification or dismissal. A copy of this authorization shall be effective as the original.

_____ _____

Signature Date

Note: All correspondence concerning applications or positions available should be directed to the **ADMINISTRATIVE OFFICE, EARLY VIEW ACADEMY OF EXCELLENCE**, 7132 W. Good Hope Rd., Milwaukee, Wisconsin 53223, call 414-793-7416

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07/01/2007; 8/2024

Early View Academy of Excellence is an Affirmative Action, Equal Opportunity Employer that complies with the provisions of the Americans with Disabilities Act.

PLEASE NOTE: THIS FORM MUST BE FILLED OUT

IN ORDER TO PROCESS YOUR APPLICATION

EARLY VIEW ACADEMY OF EXCELLENCE
Supplementary Applicant Information

No applicant for employment shall be discriminated against because of race, color, creed, religion, sex, genetic testing, sexual orientation, marital status, membership in the military reserves, national origin, ancestry, age, arrest, or non-job-related conviction record, non-job-related physical or mental disability, or the use or nonuse of lawful products off the employer's premises during nonworking hours.

Completion of questions 1 and 3 are mandatory. Completion of questions 2, 4, 5, and 6 is voluntary. We ask, however, for your cooperation in completing the following information. It will be treated confidentially. The data collected will be used to process your application, to help us monitor the Early View Academy of Excellence's Equal Employment Opportunity/Affirmative Action efforts and to comply with Federal record-keeping requirements.

PLEASE PRINT OR TYPE

1. Name (Last, First, Middle): _____

2. Sex (please check one) ☐ Male ☐ Female

3. **Your birth date** (Month/Day/Year) _____ (This information will be used for conducting a criminal background check which is mandatory for all applicants.)

4. Race (please check one)

☐ Native American	☐ Hispanic
☐ African American	☐ White
☐ Asian/Pacific Islander	☐ Other

5. Position applied for _____

6. Recruiting information: How did you FIRST hear about this job opening? (Please check only one.)

- ☐ EVAE Web Site
- ☐ Milwaukee Journal Sentinel
- ☐ Other Newspaper (please specify) _____
- ☐ City Hall Posting
- ☐ Library Posting
- ☐ Community Agency Posting (please specify) _____
- ☐ College or University Posting (please specify) _____
- ☐ From a City employee or Early View Academy of Excellence employee
- ☐ From someone who is NOT an Early View Academy of Excellence employee
- ☐ Job Hotline Number (414-286-5555)
- ☐ Received Job Interest Postcard in mail.
- ☐ Job Fair / Career Talk (please specify) _____
- ☐ TV (please specify station) _____
- ☐ Radio (please specify station) _____
- ☐ www.milwaukeeder.com
- ☐ Other internet site (please specify) _____
- ☐ Other (please specify) _____

The above **completed** information is true to the best of my knowledge.

SIGNATURE: _____ DATE: _____