

Return to:

Webster School District Attn: S.T.E.P. Coordinator PO Box 9 Webster, WI 54893 (715)-866-4391 FAX (715) 866-4283

Application

Notes:	(For office use only)	Site/staff m	member/times:	
Name:	Date:			
Phone:	one:E-mail address:			
Present street address:				
City:	State:	Zip:		
In case of emergency contact:Phone:				
REFERENCES: Please list	t three personal or professional refere ADDRESS POSI		HONE	
EDUCATION: High School Vocational Other	Name and Location of School		Dates of Attendance	
Do you fulfill STEP eligibility requirements: age 62 or over, receive Social Security, own primary residence in the Webster School District?No				
Have you been convicted of any felony, misdemeanor or other offense, (other than minor traffic violations), or do you have such a charge pending?YesNo (If yes, please attach a document that describes the facts of such a conviction/charge. A criminal record does not constitute automatic bar from employment but will be considered only as it relates to the job in question.)				
My signature below certifies that the above information and attachments are true and accurate to the best of my knowledge.				
I understand that employment depends upon a suitable position being available and that a specific assignment can be made only after an interview with appropriate staff.				
Signature of Applicant				

(Rev. 2-11-08) (over)