

PWSSD SUMMER CUSTODIAN APPLICATION 2024 PACKET

1. All summer custodians earn **\$15 an hour**, regardless of age or experience.
2. **Hours can be flexible** and may vary by each school location. Monday - Friday, 8 hours per day max. Your age may limit the amount of hours you can work.
3. **We need fifteen (15) summer helpers.** Preference will be given to successful returnees and during-the-year student custodians.
4. **Fill out the following pages as best you can.** Return to Dave Kapp at District Office, 100 West Monroe Street, Port Washington. Or scan and email to dave.kapp@pwssd.k12.wi.us.
5. Depending on the amount of applicants we get, **a short interview may be necessary.**
6. Only current seniors (and older) need to fill out the **background check form.**
7. **Any questions?** Email Dave Kapp (address above) or call 262-268-6035.

SUMMER CUSTODIAN APPLICATION - P. 2

Name:

Address:

Phone Number:

Email:

Age (as of June 10, 2024):

School you currently attend:

School Preference (Where would you like to work? Circle one.): **SES, DES, LES, TJMS, PWHS, ANY SCHOOL**

Check all that apply to you:

- ☐ I am OK with dirty work, cleaning, scrubbing, and disinfecting.
- ☐ I am OK working outside in hot, sunny, or muggy conditions.
- ☐ I am OK with repetitive work like cleaning out lockers, cleaning off desks, or moving furniture.
- ☐ I can handle lifting heavy things and can move desks and filing cabinets.
- ☐ I can use a 6-foot step ladder.
- ☐ I can follow directions and don't need much supervision.
- ☐ I can stay off of my phone when there is work to do.
- ☐ I like to stay busy at work and look for things to do.
- ☐ I am responsible and show up on time for school, work, etc.
- ☐ I can use basic tools and cleaning supplies.
- ☐ I am a fast learner.
- ☐ I am a current or returning student custodian.
- ☐ I am a current PWSSD employee.

Have you worked anywhere else before this? If so, where?

Have you ever been asked to resign, non-renewed, or fired?

Have you ever been convicted of a felony, misdemeanor, or municipal ordinance?

Do you have any references we can call? Include a phone number and/or email address.
(Employer, teacher, relative):

Port Washington-Saukville School District

**PROSPECTIVE EMPLOYEE OR EMPLOYEE
BACKGROUND CHECK FORM**

(For official use only, not to be released to unauthorized persons)

In order to provide a safe environment for our students, we reserve the right to check references and review relevant public documents regarding criminal activity of any employee or prospective employee who may have contact with our students. All employee acceptance and placement decisions are subject to successful background checks. For this reason, please provide information as requested below:

Print Full Name

Date of Birth

Address

Race

City/State/Zip

Gender

I hereby authorize the Business Office of the Port Washington-Saukville School District to obtain information and records pertaining to me from any or all law enforcement or court records. By signing, the district is granted the authorization to obtain such records for a period of three years from the signed date, if the signer applies for future positions.

I do freely consent to such inquiries being conducted and, as such, do hereby agree to waive and forever release and discharge the district and its present and former officers, employees and agents of any and all claims, demands, damages, actions, and causes of action of whatever kind or nature that might otherwise arise out of such inquiries, including, but not limited to, matters arising at law, in equity, under the district's policies, procedures, contracts, practices or any other written instruments, standards, or protocols, or in state or federal agencies, courts, or other tribunals of competent jurisdiction, without limitation.

I understand that investigations into my background may be performed in connection with my application for employment with the Port Washington-Saukville School District. These investigations may include checks of local, state and federal judicial and other public records, both civil and criminal, social security information, motor vehicle driving records, employment verification, professional referencing and education verification in connection with my employment. These investigations may constitute a "consumer credit report" as that term is defined in the Fair Credit Reporting Act (15 U.S.C. §1681a). I hereby fully authorize the Port Washington-Saukville School District, and/or its agents, including IdentityPi, Inc. to conduct such investigations or obtain such reports, and I authorize such the release of this information on my behalf. I understand that I may request from IdentityPi, Inc. or any consumer reporting agency obtaining such a report for the Port Washington-Saukville School District, a complete and accurate disclosure of the nature and scope of the report or investigation.

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this authorization is voluntary.

Signature

Date

* Race and gender identifications are required by the Wisconsin Department of Justice in order to properly carry out the background check.

The Port Washington-Saukville School District does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities and provides equal access to designated youth groups. The following person has been designated to handle inquiries regarding the non-discrimination policies: Director of Special Services, Port Washington-Saukville School District, 100 W. Monroe Street, Port Washington, WI 53074 - Duane.Woelfel@pwssd.k12.wi.us

Reviewed by Buelow Vetter: 7/19/16