

Date of Application

CUSTODIAL TRANSFER APPLICATION
Independent School District #624
4855 Bloom Avenue
White Bear Lake, MN 55110

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Position **Building** **Shift** **Hours** **License Required**

Name **Home Phone:**

Mailing Address

City **State** **Zip**

Present Building **Supervisor**

Present Shifts: **Hours** **Start** **End**

How long at present job? **How long at present shift?**

Present Boiler License held **Date Expires**

List below any college or vocational training and indicate duration. (Please include training by District No. 624. Asbestos, Right to Know, etc.)

Year	Name of Course	Hours of Training	Place
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Starting date of continuous employment in District No. 624

Board Hiring/Seniority Date:

WE ARE AN EQUAL OPPORTUNITY EMPLOYER