

Brittany Warren



Experience

New Richmond School District / Teacher

5th Grade Teacher: August 2019 - June 2025, New Richmond, WI

2nd Grade Teacher: June 2014 - August 2019 New Richmond, WI

Provided instructional, management, and assessment strategies to meet the needs of 24+ students each year in math, reading, writing, science, social studies, and phonics. Created, administered, and graded tests, essays, and quizzes. Experienced in facilitating an engaging classroom learning experience through organized lessons and personalized learning plans. Incorporated technology into daily learning. Collaborated and communicated with colleagues weekly and took organized notes about our meetings that were shared with the team.

Washburn County Register of Deeds Office

Data Entry Assistant: May 2010-August 2010

Input details from legal property documents (deeds, mortgages, liens) into a county system, a specialized software electronic recording system.

Washburn County Aging and Disability Resource Center

Office Assistant: May 2010-August 2010

Updated brochures and flyers using Microsoft Office. Answered phone calls and directed the caller to necessary points of contact or took detailed messages for the employer. Organized office files.

Education

University of Wisconsin-River Falls / B.A. in Elementary Education with a Minor in Language Arts

September 2009 - December 2013, River Falls, WI

Dean's List and Elementary Education Student of the Year 2013



420 N. Pokegama Ave
 Grand Rapids, MN 55744
 (218)326-7606
 (218)326-7608 Fax
 www.cityofgrandrapidsmn.com

Employment Application

An Equal Opportunity Employer

Please complete by printing in ink or typing. Application must be signed for employment consideration.

Thank you for considering employment with the City of Grand Rapids. We welcome you as an applicant and look forward to reviewing your application information. It is the City's policy to provide equal opportunity in employment. The City will not discriminate on the basis of race, color, creed, age, religion, national origin, marital status, disability, sex, sexual orientation, familial status, status with regard to public assistance, local human rights commission activity or any other basis protected by law.

Please furnish complete information on the application form, so we may accurately and completely assess your qualifications. You may attach any other information that provides additional detail about your qualifications for employment in the position you seek. Please refer to the Applicant Data Practices Advisory for guidance regarding how your application information will be used, the consequences of providing or not providing information, and more.

The City of Grand Rapids accommodates qualified persons with disabilities in all aspects of employment, including the application process. If you believe you need a reasonable accommodation to complete the application process, please contact Human Resources at 218-326-7606.

PERSONAL INFORMATION

NAME Last First Middle Warren, Brittany Nicole	POSITION APPLIED FOR: library public services clerk
	TODAY'S DATE: 1/14/2026 DATE AVAILABLE TO WORK: Feb. 9, 2026
	STATUS DESIRED: <input type="checkbox"/> Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/> Seasonal
	EMAIL ADDRESS: _____
Are you a U.S. citizen or do you have legal Authorization to work in the U.S.? Proof of age and/or eligibility to work may be requested.	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Will your continued employment require employer sponsorship? <input type="checkbox"/> <input checked="" type="checkbox"/>
Do you have a valid driver's license? (For driving positions only)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Are you <u>under</u> 18 years of age? <input type="checkbox"/> <input checked="" type="checkbox"/>

EDUCATIONAL INFORMATION

School Name, City and State		Major Area of Study
High School: Spooner High School	Diploma <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO GED <input type="checkbox"/> YES <input type="checkbox"/> NO	
College: University of WI-River Falls	Degree Completed: <input checked="" type="checkbox"/> YES <input type="checkbox"/> Associates <input checked="" type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Other <input type="checkbox"/> NO # of years completed _____ Semester/Credit hours earned _____	Elementary Education
Graduate School:	Degree Completed: <input type="checkbox"/> YES <input type="checkbox"/> Associates <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Other <input type="checkbox"/> NO # of years completed _____ Semester/Credit hours earned _____	
Technical or Vocational Programs:	(indicate type of certificate earned)	

List any other courses, seminars, workshops, or training you have that may provide you with skills related to this position:

List any current licenses or certificates you possess which may be related to this position:

List any current registration(s) or membership(s) related to the position for which you are applying:

EMPLOYMENT EXPERIENCE

CURRENT EMPLOYMENT INFORMATION		
EMPLOYER	DATES EMPLOYED	JOB TITLE:
	FROM	TO
ADDRESS		NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:	
TELEPHONE Area Code + Number		
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other		
REASON FOR LEAVING:		

PREVIOUS EMPLOYMENT INFORMATION		
List all positions held including full-time, part-time, military, summer, volunteer work and any periods of unemployment. Explain any period of unemployment. Attach additional sheet if necessary.		
EMPLOYER New Richmond School District	DATES EMPLOYED	JOB TITLE: 2nd/5th Grade Teacher
	FROM	TO
ADDRESS 635 Richmond Way	06/14	6/25
CITY, STATE, ZIP New Richmond, WI 54017	NAME OF LAST SUPERVISOR: Deanna Wuotila	
TELEPHONE Area Code + Number 7152431400	DESCRIBE YOUR WORK IN THIS JOB: Provided instructional, management, and assessment strategies to meet the needs of 24+ students each year in math, reading, writing, science, social studies, and phonics. Created, administered, and graded tests, essays, and quizzes. Experienced in facilitating an engaging classroom learning experience through organized lessons and personalized learning plans. Incorporated technology into daily learning. Collaborated and communicated with colleagues weekly and took organized notes about our meetings that were shared with the team.	
May we contact this employer? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<input checked="" type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other		
REASON FOR LEAVING: moved		

EMPLOYER Washburn County Register of Deeds	DATES EMPLOYED	JOB TITLE: data entry assistant
	FROM	TO
ADDRESS 10 4th Ave	5/10	8/10
CITY, STATE, ZIP Shell Lake, WI, 54871	NAME OF LAST SUPERVISOR: Renee Bell	
TELEPHONE Area Code + Number 7154684616	DESCRIBE YOUR WORK IN THIS JOB: Input details from legal property documents (deeds, mortgages, liens) into a county system, a specialized software electronic recording system.	
May we contact this employer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input type="checkbox"/> Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/> Other		
REASON FOR LEAVING: went back to college		

PREVIOUS EMPLOYMENT INFORMATION CONTINUED

List all positions held including full-time, part-time, military, summer, volunteer work and any periods of unemployment. Explain any period of unemployment. Attach additional sheet if necessary.

EMPLOYER Washburn County ADRC	DATES EMPLOYED		JOB TITLE: office assistant
	FROM	TO	
ADDRESS 304 2nd St	5/10	8/10	NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP Shell Lake, WI 54871	DESCRIBE YOUR WORK IN THIS JOB: Updated brochures and flyers using Microsoft Office. Answered phone calls and directed the caller to necessary points of contact or took detailed messages for the employer. Organized office files.		
TELEPHONE Area Code + Number 7156354460			
May we contact this employer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Full-time <input checked="" type="checkbox"/> Part-time <input type="checkbox"/> Other			
REASON FOR LEAVING: went back to college			

EMPLOYER	DATES EMPLOYED		JOB TITLE:
	FROM	TO	
ADDRESS			NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:		
TELEPHONE Area Code + Number			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other			
REASON FOR LEAVING:			

EMPLOYER	DATES EMPLOYED		JOB TITLE:
	FROM	TO	
ADDRESS			NAME OF LAST SUPERVISOR:
CITY, STATE, ZIP	DESCRIBE YOUR WORK IN THIS JOB:		
TELEPHONE Area Code + Number			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other			
REASON FOR LEAVING:			

UNPAID EXPERIENCE

Describe any unpaid or volunteer experience relevant to the position for which you are applying (you may include, if you wish, information which would reveal race, sex, religion, age, disability, or other protected status).

MILITARY EXPERIENCE

Did you serve in the U.S. Armed Forces? Yes No

Describe your duties:

Do you wish to apply for Veteran's Preference points: Yes No

If you answered "yes," you must complete the enclosed application for Veterans' Preference Points, and submit the application and required documentation to the City of Grand Rapids by the application deadline of the position for which you are applying.

AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that all information I have provided in this application for employment is true and complete to the best of my knowledge. Any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or if employed, will be grounds for dismissal, regardless of length of employment or when the misrepresentation or omission is discovered.

I understand that submission of an application does not guarantee employment. I acknowledge that I have received a copy of the job description summary for the position/s for which I am applying. I further acknowledge my understanding that employment with the City of Grand Rapids is "at will," and that employment may be terminated by either the City of Grand Rapids or me at any time, with or without notice. I understand that none of the documents, policies, procedures, actions, statements of the City of Grand Rapids or its representatives used during the employment process is deemed a contract of employment, real or implied. I further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the City of Grand Rapids. In consideration for employment, if employed, I agree to conform to the rules, regulations, policies, and procedures of the City of Grand Rapids at all times and understand that such obedience is a condition of employment.

I understand that if offered a position with the City of Grand Rapids, I may be required to submit to a pre-employment medical and psychological examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already offered.

With my signature below, I am providing the City of Grand Rapids authorization to verify all information I provided within this application packet, including contacting current or previous employers. However, I understand that if, in the Employment Experience section I have answered "No" to the question, "May we contact your current employer?," contact with my current employer will not be made without my specific authorization.

I have read the included Applicant Data Practices Advisory, and I further understand that criminal history checks may be conducted (after I have been selected for an interview, in the case of non-public safety positions) and that a conviction of a crime related to this position may result in my being rejected for this job opening. I also understand it is my responsibility to notify the City of Grand Rapids in writing of any changes to information reported in this application for employment.


Signature

01/14/2026

Date

Name and number of person completing this form if other than applicant: _____