EMPLOYMENT APPLICATION – EXTRA CURRICULAR

Dear Applicant:

Thank you for your interest in obtaining employment with the Darrington School District. Our application selection procedures are as follows:

- Complete the enclosed application form and affirmative action questionnaire
- Include a cover letter stating briefly, in your own words, why you are interested in coaching an activity in Darrington.
- When your completed application has been received, it will be placed in our active applicant pool for review after the posting closes.
- Interviews are scheduled through the Athletic Director. Please do not contact principals regarding position openings and interviews.
- When the interview and selection process is complete, the recommended candidate will be offered the position and all other candidates will be notified of the decision.
- If you are offered a position in the District, you will be required, under Washington Law, to be fingerprinted for state and national background checks. Cost for the background check must be paid by the applicant.

Applications will be retained in the *current* file until November 1 following the date of receipt. After that date, renewal will be made annually for the ensuing one year upon request by the applicant.

Thank you for your application. Feel free to contact the administration office if you have any questions regarding application procedures.

We reserve the right to modify the details of a position posting at any time.

AFFIRMATIVE ACTION PROGRAM QUESTIONNAIRE

Your cooperation in completing this form is appreciated. Information derived from this sheet is for statistical purposes, to prevent discrimination and to help in the evaluation of our personnel procedures and policies in accordance with the District's Affirmative Action Program. This information is voluntary and confidential and will not be filed with or made a part of your application or personnel file.

Name	Date		
Position Applied for			
Other positions you are interested in			
Sex: Male Female	Age: Under 40	Over 40	
Vietnam Veteran (Service between 1 Au	g 1964 and 1 May 1975) Yes	No	
Disabled Veteran (recognized by the Vet	terans' Administration) Yes	No	
Disabled (any person who has a physica more of major life activities) Yes	al or mental impairment which substantia	lly limits one or	
Please specify the disability			
Racial/Ethnic Identification Group:			
peoples of North America and affiliation or community recognit Asian or Pacific Islander: A per Far West, Southeast Asia or the latter Philippine Islands, and Samos Black, not of Hispanic Origin: of Africa.	erson having origins in any of the original Pacific Islands. These areas include China. A person having origins in any of the Bla	athrough tribal al peoples of the a, Japan, Korea, ck racial groups	
Spanish culture or origin, regardle White, not of Hispanic Origin: Europe, North Africa or the Midd	Puerto Rican, Cuban, Central or South A ess of race. A person having origin in any of the ordle East (or the Indian Subcontinent). than one of the above characteristics apple	iginal peoples of	

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DISCLOSURE

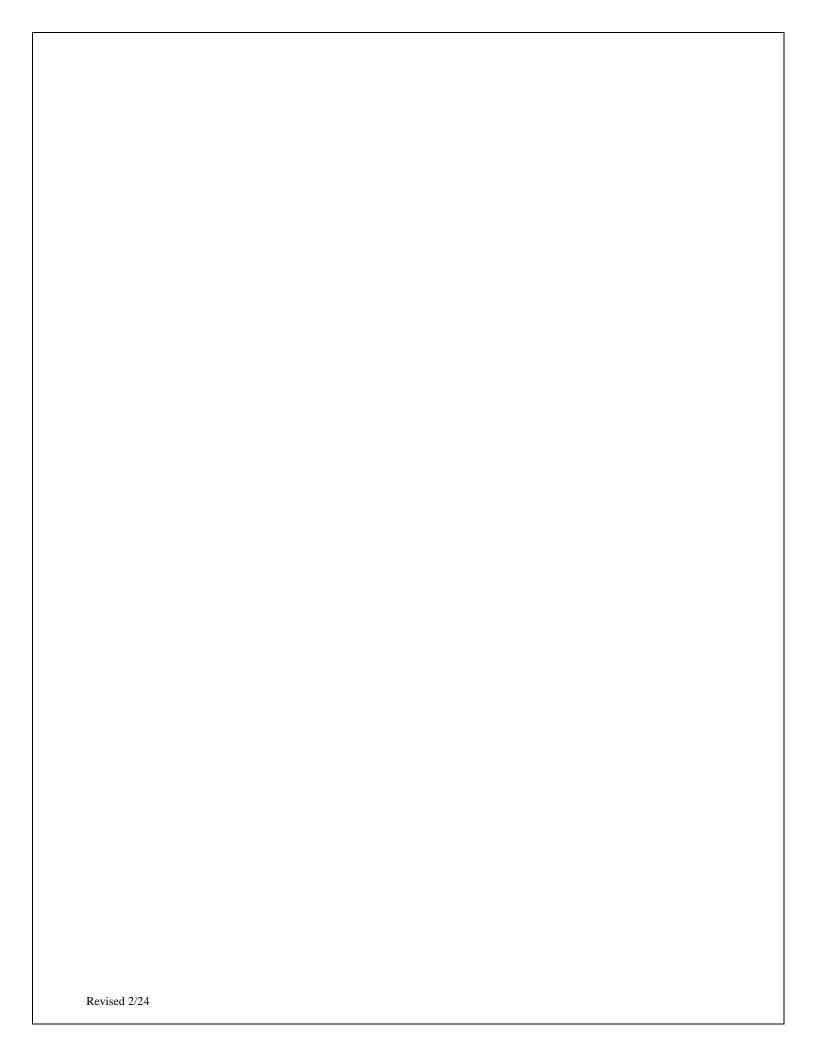
1.	Have you ever been convicted of any crime against persons? If yes, please explain. Use additional paper if necessary.
2.	Have you ever been found in any dependency action under RCW 13.34.030(2)(b) to have sexually assaulted or exploited any minor or to have physically abused any minor? If yes, please explain. Use additional paper if necessary.
3.	Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor? If yes, please explain. Use additional paper if necessary.
4.	Have you ever been found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor? Use additional paper if necessary.
Fai	ure to complete this DISCLOSURE will invalidate any application.
Sig	nature of Applicant Date

EMPLOYMENT APPLICATION – *EXTRA CURRICULAR*

DARRINGTON SCHOOL DISTRICT NO. 330

P.O. Box 27, 1065 Fir Street, Darrington, WA 98241

Last Name	First Name	Middle	Name	Social Sec	urity Number
(Print your last name a	as it appears on your Social S	ecurity Card.)			
Present Address					
	treet or P.O. Box	City	State/Zip	Telep	hone Number
D (A11					
Permanent Addres	Street or P.O. Box	City	State/Zip	Telen	hone Number
	Succi of 1.0. box	City	State/Zip	reiep	none number
PROFESSIONAL IN					
Designate the posi	tion for which you are a	pplying			
Have you ever wo	rked for the Darrington S	School District:	Yes	No	(if yes)
Position(s)					
EDUCATION					
	Name of school and loca	tion	Degree	No. of Years	Yr Graduated
High School/GED					
College/University					
Business School					
Vocational School _					
Non-credit, night scho	ool, distance learning courses,	other education (List	name of cours	se, grade, vear t	aken.):
	,			, C	,
	1 1)				
(Use other side if need	ied.)				



SPECIAL SKILLS	
List any other education, training, spe	ecial skills, or certificates/licenses you posses:
List any machines or equipment you	are qualified and experienced at operating:
PREVIOUS COACHING/ADVISI	NC EXPERIENCE
	NO EM EMENCE
List most recent experience first.	
Dates of Employment From	To
Name and Address of Employer	
Name of Supervisor	
Number of Years Employed	Position Held
Reason for Leaving	
Dates of Employment From	To
Name and Address of Employer	
Name of Supervisor	
Number of Years Employed	Position Held
Reason for Leaving	

MILITARY SERVICE			
Branch of Service	Dates of Service	Type of Dis	scharge
Service Occupation			
PERSONAL			
Are you a U.S. citizen or ha	ve you applied for citizenship? []	YES [] NO	
Do you have any physical, i of work for which you are a	mental, or sensory limitations or disapplying? [] YES [] NO	abilities that may affec	ct your ability to perform the type
If yes, explain			
Note: A conviction record disclose details. Have you previously	a court of law for a crime or released will not necessarily disqualify you worked for the Darrington	ou from employment;	however, you will be asked to
the basis of sex, race status, sexual orienta trained dog guide or other designated you handle questions and Superintendent, Title 436-1323 and Cindy and Section 504 Cor	hool District does not disce, creed, religion, color, nation, gender expression or service animal and provide the groups. The following a complaints of alleged disce IX and Civil Rights Coordinator, compliance Coordinator, cohorrington WA 98241.	tional origin, age identity, disabilities equal access to employee(s) has crimination: Trace dinator, tfranke(s) ol Principal, Spe	e, veteran or military ity, or the use of a o the Boy Scouts and been designated to cy Franke, @dsd.k12.wa.us (360) cial Education Director
REFERENCES			
REFERENCES			

GENERAL INFORMATION

- A personal interview is required before an applicant can be recommended for employment. The applicant will be contacted by the District Office to arrange a time for an interview.
- Any falsification or omission on this application for employment will be considered sufficient cause for dismissal.
- ONLY CANDIDATES WITH COMPLETE APPLICATION MATERIALS WILL BE CONSIDERED FOR THE POSITION AND NOTIFIED OF THE POSITION STATUS.
- Washington State law now requires that any person newly hired by a school district must be fingerprinted for a
 State and National background check. Employment is contingent upon clearance of the background check. Cost
 for the background check must be paid by the applicant
- Do you have a current first aid card? ____ YES ____ NO If you do not have a current first aid card, the initial card is your responsibility at your own expense.

The foregoing is true and complete to the best of my knowledge. I acknowledge that failure to provide true and complete information can be, if I am hired, grounds for discipline, up to and including discharge.

Signature of Applicant	Date
**************	*****************

I hereby authorize the Darrington School District, at its discretion, to contact my previous employers, related references, and public entities, which may have information relative to my suitability for employment. I hereby release all of those employers, references, academic institutions, and the District from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the District.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials, employment references and background. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the District has not employed me and for immediate dismissal if the District has employed me. I also authorize the District to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having a legal and proper interest, and I hereby release the District from any and all liability for its providing this information.

I hereby acknowledge that I have read and understand the preceding statement.

Signature	Date	
Printed Name		

Applicant's name	Date
Please respond to the following question. Return your	response with your completed application.
WHY DO YOU ENJOY WORKING WITH CHILDRI	EN/YOUNG ADULTS?