

EMPLOYMENT APPLICATION - CERTIFIED

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 resume' as well as a cover letter, stating briefly in your own words why you are interested in teaching in Darrington.
- Supply a copy of your Washington State Teaching Certificate or ESA certificate.
- When your application file has been completed, it will be placed in our active applicant pool. As positions for which you are qualified become available, submit a letter of intent, stating your interest in that particular position. If you are selected for further consideration, you will be contacted.
- Interviews are scheduled through the Administration Office. 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 a position within the Darrington School District is offered to you, please be prepared to furnish official, sealed transcripts from your college or university.
- 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 checks 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 Aug 1964 and 1 May 1975) Yes No

Disabled Veteran (recognized by the Veterans' Administration) Yes No

Disabled (any person who has a physical or mental impairment which substantially limits one or more of major life activities) Yes No

Please specify the disability _____

Racial/Ethnic Identification Group:

American Indian or Alaskan Native: A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.

Asian or Pacific Islander: A person having origins in any of the original peoples of the Far West, Southeast Asia or the Pacific Islands. These areas include China, Japan, Korea, the Philippine Islands, and Samoa.

Black, not of Hispanic Origin: A person having origins in any of the Black racial groups of Africa.

Hispanic: A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

White, not of Hispanic Origin: A person having origin in any of the original peoples of Europe, North Africa or the Middle East (or the Indian Subcontinent).

Mixed. A person to whom more than one of the above characteristics apply.

Please specify: _____

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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.

Failure to complete this DISCLOSURE will invalidate any application.

Signature of Applicant _____ Date _____

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DARRINGTON SCHOOL DISTRICT NO. 330

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

Last Name First Name Middle Name Social Security Number
(Print your last name as it appears on your Social Security Card.)

Present Address _____
Street or P.O. Box City State/Zip Telephone Number

Permanent Address _____
Street or P.O. Box City State/Zip Telephone Number

E-mail Address _____

The District will accept applications from individuals wishing to share a position.

PROFESSIONAL INFORMATION

Designate in order of preference the category of position for which you are applying by writing the numbers 1, 2, 3 beside the following:

Kindergarten Primary Intermediate Middle School High School Special Education Administration

ELEMENTARY TEACHERS

List below the Grade or Special Positions for consideration

SECONDARY TEACHERS

List below the Grade or Special Positions for consideration

Subject Grade

Subject Grade

Subject Grade

Check those activities you **can** and would like to direct or coach:

- | | | | | |
|---------------------------------------|--|--|--|---|
| <input type="checkbox"/> Annual | <input type="checkbox"/> ASB Advisor | <input type="checkbox"/> Athletic Director | <input type="checkbox"/> Baseball | <input type="checkbox"/> Basketball |
| <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Class Advisor | <input type="checkbox"/> Club Advisor | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Football | <input type="checkbox"/> Music | <input type="checkbox"/> Odyssey of the Mind | <input type="checkbox"/> Outdoor Education | <input type="checkbox"/> School Newspaper |
| <input type="checkbox"/> Softball | <input type="checkbox"/> Track | <input type="checkbox"/> Traffic Safety | <input type="checkbox"/> Vocational Director | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Wrestling | <input type="checkbox"/> Higher Level Thinking Games | | <input type="checkbox"/> Hi-Q (Knowledge Bowl) | |
| <input type="checkbox"/> _____ | | <input type="checkbox"/> _____ | | |

EDUCATION

Work leading to the bachelor's degree

Name of Institution	Location	Dates of Attendance	Degree	Graduation Date	Fields of Study
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Graduate work

_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

(Use other side if needed.)

CERTIFICATION

List below the Washington Teaching, Administrative, or Special Certification held (or to be held):

Type	Number	Date of Issue	Date of Expiration	Endorsement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PREVIOUS EMPLOYMENT

List most recent experience first. Please include student teaching if you are a beginning teacher.

Dates of Employment From _____ To _____

Name and Address of Employer _____

Name of Supervisor _____ Telephone _____

Number of Years Employed _____ Grade/Subject Taught or Position Held _____

Reason for Leaving _____

Dates of Employment From _____ To _____

Name and Address of Employer _____

Name of Supervisor _____ Telephone _____

Number of Years Employed _____ Grade/Subject Taught or Position Held _____

Years of Employment _____ Reason for Leaving _____

PREVIOUS EMPLOYMENT, CONTINUED

Dates of Employment From _____ To _____

Name and Address of Employer _____

Name of Supervisor _____ Telephone _____

Number of Years Employed _____ Grade/Subject Taught or Position Held _____

Years of Employment _____ Reason for Leaving _____

Dates of Employment From _____ To _____

Name and Address of Employer _____

Name of Supervisor _____ Telephone _____

Number of Years Employed _____ Grade/Subject Taught or Position Held _____

Years of Employment _____ Reason for Leaving _____

MILITARY SERVICE

Branch of Service _____ Dates of Service _____ Type of Discharge _____

Service Occupation _____

PERSONAL

Are you a U.S. citizen or have you applied for citizenship? YES NO

Do you have any physical, mental, or sensory limitations or disabilities that may affect your ability to perform the type of work for which you are applying? YES NO

If yes, explain _____

Have you been convicted in a court of law for a crime or released from prison YES NO

Note: A conviction record will not necessarily disqualify you from employment; however, you will be asked to disclose details.

Have you previously worked for the Darrington School District? If yes, under what name? _____

NOTE: Darrington School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employee(s) has been designated to handle questions and complaints of alleged discrimination: Tracy Franke, Superintendent, Title IX and Civil Rights Coordinator, tfranke@dsd.k12.wa.us (360) 436-1323 and Cindy Christoferson, High School Principal, Special Education Director and Section 504 Compliance Coordinator, cchristoferson@dsd.k12.wa.us (360) 436-1140, PO Box 27 Darrington WA 98241.

REFERENCES

If you have teaching experience, include your last superintendent and principal among your references.

Name	Address	Phone	Official Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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.
- Arrange to have an up-to-date set of your credentials sent to our office from your placement bureau.
- If a contract is issued to you, you will be asked to furnish the District with a complete official transcript of all your college work.
- 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

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.

WHAT IS YOUR PHILOSOPHY OF EDUCATION?