

SATSOP SCHOOL DISTRICT NO. 104

Box 96, Satsop, WA 98583

(360) 482-5330

FAX (360) 482-5724

Application for Certified Employment

Last Name, First, Middle:			Date of Application:
Current Address:			Social Security No:
City	State	Zip	Position for which you are applying:
Telephone No:	Message Phone:		Are you legally authorized to work in the U.S.? Yes _____ No _____

Are you currently employed? Yes No May we contact your present employer? Yes No

General Information and Instructions:

1. A completed application form is required for all candidates for employment. If employed, the application form will become a part of the permanent employment record.
2. Applications are kept active for one calendar year (January-December). Renewal of applications will be made upon the request of the applicant. Applications will be destroyed after one year unless renewed.
3. A completed application must be received by the District prior to the closing dates on job posting announcements.
4. Present or past employers will be contacted for references as part of the selection process.

Federal and/or state criminal history fingerprinting background checks will be required of candidates who will or may have unsupervised access to children or to persons with developmental disabilities. Any offer of employment is conditional and subject to an acceptable outcome of a criminal history background check.

Satsop 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 has been designated to handle questions and complaints of alleged discrimination: Title IX Coordinator: Tiffany Osgood, Box 96, Satsop, WA 98583, (360) 482-5330, tosgood@satsopschool.org. Other concerns can be addressed to Section 504/ADA Coordinator: Janet Gatlin, Box 96, Satsop, WA 98583, (360) 482-5330, jgatlin@satsopschool.org or Compliance Coordinator for State Law: Marsha Hendrick, Box 96, Satsop, WA 98583, (360) 482-5330, mhendrick@satsopschool.org

Signature

Date

Equal Opportunity Employer

For Office Use Only

WSP Clearance: _____

Beginning Board Hire Date: _____

Education and Training

Name of School:	Location:	Degree	Credits Earned	Date of Degree
High School				
College/University				
College/University				
College/University				

Certificates

Type of Certificate	Endorsement/Level	Certificate Number	Exp. Date	State

Military Service

U.S. Military Record: Branch: _____ Rank: _____ Dates of Service: _____ Type of Discharge: _____
Special type of training:

Professional References:

Name:	Phone No.:
Position Title:	Company Name:
Name:	Phone No.:
Position Title:	Company Name:
Name:	Phone No.:
Position Title:	Company Name:

Have you ever been dismissed from a position in the last ten years? ____ Yes ____ No

Have you ever been asked to resign from a position? ____ Yes ____ No

Have you ever had your driver's license suspended or revoked? ____ Yes ____ No

If you answered yes to any of the above questions, please explain.

Teaching Experience

District Name	Address	Supervisor's Name/Phone #	Date of Employment
Grade/Subject	Salary Placement	Reason for Leaving	
District Name	Address	Supervisor's Name/Phone #	Date of Employment
Grade/Subject	Salary Placement	Reason for Leaving	
District Name	Address	Supervisor's Name/Phone #	Date of Employment
Grade/Subject	Salary Placement	Reason for Leaving	
District Name	Address	Supervisor's Name/Phone #	Date of Employment
Grade/Subject	Salary Placement	Reason for Leaving	

Certificate Substitute Experience

District Name and Address	Grade/Subject Taught	Dates of Employment	Supervisors Name/Phone	Rate of Pay

Other Work Experience (List most recent experience first)

Name	Address	Supervisor's Name/Phone	Date of Employment
Position Held	Rate of Pay	Reason for Leaving	
Name	Address	Supervisor's Name/Phone	Date of Employment
Position Held	Rate of Pay	Reason for Leaving	
Name	Address	Supervisor's Name/Phone	Date of Employment
Position Held	Rate of Pay	Reason for Leaving	

**Applicant Disclosure Form
Pursuant to Chapter 43.43 RCW**

Answer **YES** or **NO** to each listed item. If the answer is **YES** to any item, explain in the area provided, indicate the charge or finding, the date, and the court(s) involved. If you do not understand the following questions or if you are uncertain as to your answer to those questions, do not complete this form until such time as you are certain as to your response.

1. Have you ever been convicted of any crimes against persons as defined in Section 43.43 RCW and listed as follows: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree assault of a child; first or second degree rape; first, second or third degree rape of a child; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple degree criminal mistreatment; child abuse or neglect as defined in RCW 26.44.020; first or second degree custodial interference; malicious harassment; first, second or third degree child molestation; first or second degree sexual misconduct with a minor; patronizing a juvenile prostitute; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; or any of these crimes as they may be renamed in the future?

_____ Yes _____ No. If yes, explain: _____

2. Have you been convicted of crimes relating to financial exploitation if the victim was a vulnerable adult as defined in Chapter 43.43.830(6) RCW amended, and listed as follows: first, second, or third degree theft; first or second degree robbery; forgery; or any of these crimes as they may be renamed in the future?

_____ Yes _____ No. If yes, explain: _____

3. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?

_____ Yes _____ No. If yes, explain: _____

4. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually assaulted or exploited any minor or to have physically abused any minor?

_____ Yes _____ No. If yes, explain: _____

5. Have you ever been found in any disciplinary board final decision to have sexually or physically abused any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult?

_____ Yes _____ No. If yes, explain: _____

6. Have you ever been found by a court in a protection proceeding under Chapter 74.34 RCW to have abused or financially exploited a vulnerable adult?

_____ Yes _____ No. If yes, explain: _____

7. Have you ever been convicted, fined, imprisoned or placed on probation of any crime for any violation of any law? For the purposes of this question, the term "convicted" means and includes: (1) all instances in which a plea of guilty or nolo contendere is the basis for the conviction and (2) all proceedings in which a charge has been deferred from prosecution or the sentence has been suspended or deferred. A conviction does not necessarily exclude you from employment.

_____ Yes _____ No. If yes, explain: _____

Pursuant to RCW 9A.72.085, I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I authorize the Satsop School District No. 104 to inquire of former employers, supervisors, peers and references and to obtain any and all information regarding my job related background. I release and discharge the Satsop School District No. 104 and its agents, and all individuals inquired of as a result of this application from any and all liability in obtaining or disclosing such information. I agree that if I have provided false, misleading or incomplete information, the District may, at its sole discretion, without notice or due process procedures, terminate my employment. If such action is taken by the District, it is agreed that any employment contract deemed to exist shall be void from its inception.

Name (please print) _____ Signature _____ Date _____