

MONTESANO SCHOOL DISTRICT NO. 66

502 E. Spruce Ave

Montesano, Washington 98563

(360) 249-3942 ■ 1-(360) 841-7198 ■ <http://www.monteschools.org>

APPLICATION FOR CERTIFICATED EMPLOYMENT

Washington Law requires the fingerprinting of any person who has direct, unsupervised contact with students.

All offers of employment with the Montesano School District are conditional until the District receives clearance from the criminal background check, has received school board approval and receives satisfactory results from the WA State Sexual Misconduct Form.

Montesano School District Provides Equal Opportunity for Employment and Educational Programs and Activities.

The Montesano School District No. 66 complies with all federal and state rules and regulations and does not discriminate on the basis of race, creed, religion, color, national origin, sex, sexual orientation including gender expression or identity, veteran or military status, marital status, age, presence of any sensory, mental or physical disability, or the use of a trained dog guide or service animal by a person with a disability. This non-discrimination statement applies to employment opportunities and all students who are interested in participating in educational programs and/or extracurricular school activities and provides equal access to the Boys Scouts of America and other designated youth groups. Inquiries regarding compliance, appeal and/or grievance procedures may be directed to Montesano School District's Title IX/RCW 28A.640 and Compliance Officer, Pam Banks at 502 E. Spruce Ave, Montesano, WA, (360) 249-3942, and/or Section 504/ADA Coordinator, Shawn Brown, at 502 E. Spruce Ave, Montesano, WA, (360) 249-3942.

PERSONAL DATA

TODAY'S DATE: ____/____/____

(FIRST NAME)

(LAST NAME)

(MI)

Present Address: _____ Telephone: _____
(STREET)

(CITY)

(STATE)

(ZIP CODE)

(PLEASE NOTIFY US OF ANY CHANGE OF ADDRESS OR TELEPHONE)

Daytime Phone: ____/____ Evening Phone: ____/____ Cell Phone: ____/____

Email Address: _____

Please select the specific position(s) for which you are applying. Job Posting # _____

____ ADMINISTRATOR ____ TEACHER ____ SUBSTITUTE ____ OTHER (Specify) _____

Are you currently under contract with another school district or education institution? _____

Do you hold a Washington teaching or administrative Certificate? _____ Certificate Type: _____
Expiration Date: _____

Do you hold an unendorsed certificate? ____ If no endorsement, indicate degree or major: _____

Endorsed Certificate holders please list endorsements: _____

Please attach a copy of your teaching certificate.

EDUCATIONAL BACKGROUND

INSTITUTIONS ATTENDED	DATES FROM-TO	MAJOR SUBJECTS	DEGREE GRANTED	DATE OF DEGREE OR GRADUATION	GRADE POINT AVERAGE OR SCHOLARSHIP AVERAGE
High School					
College or University					

Transcripts must be provided to verify college education.

STUDENT TEACHING/PRACTICUM EXPERIENCE

SCHOOL & LOCATION	GRADE OR SUBJECT	DATES

TEACHING EXPERIENCE

List all paid teaching experiences, beginning with your most recent position. If you are offered employment by the Montesano School District, you will be asked to provide official verification of your previous teaching experience, including beginning and ending dates.

SCHOOL DISTRICT OR COLLEGE	CITY	STATE	POSITION OR SUBJECT TAUGHT	FULL TIME	PART TIME	DATES OF EMPLOYMENT		Reason for Leaving
						From	To	

SCHOOL ADMINISTRATIVE EXPERIENCE

SCHOOL DISTRICT	CITY	STATE	POSITION HELD	FULL TIME	PART TIME	DATES OF EMPLOYMENT		Reason for Leaving
						From	To	

WORK or MILITARY HISTORY**List most recent non-school employers including present non-school employer if applicable**

Employer:	Date Started:
Address:	Date Left:
City, State, Zip	Telephone: ()
Position:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Supervisor:	Final Hourly Pay Rate: \$
Duties:	
	May we contact this employer?
Reason for Leaving	<input type="checkbox"/> Yes <input type="checkbox"/> No Phone#
Employer:	Date Started:
Address:	Date Left:
City, State, Zip	Telephone: ()
Position:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Supervisor:	Final Hourly Pay Rate: \$
Duties:	
	May we contact this employer?
Reason for Leaving	<input type="checkbox"/> Yes <input type="checkbox"/> No Phone #
Employer:	Date Started:
Address:	Date Left:
City, State, Zip	Telephone: ()
Position:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
Supervisor:	Final Hourly Pay Rate: \$
Duties:	
	May we contact this employer?
Reason for Leaving	<input type="checkbox"/> Yes <input type="checkbox"/> No Phone #

Use additional sheet if needed)

PROFESSIONAL REFERENCES

List professional references who can evaluate your ability to perform in the position for which you are applying.

NAME (Print)	OFFICIAL POSITION	ADDRESS (Print)	PHONE NUMBER

Will your records be submitted under any other names(s)? If so, what name(s)?

(Please Print)

I authorize the Montesano School District to contact my prior employers, references, any person, agency or institution to obtain information about my background qualifications and suitability for employment. I authorize all such persons and organizations to provide information about me to the Montesano School District. I waive any claims against such persons and organizations for providing information to the Montesano School District, regardless of the accuracy of the information or the results of any application for employment.

I expressly release and hold harmless any employer and/or reference I have listed on my employment application from any liability whatsoever in releasing relevant information to the Montesano School District concerning my past employment, including information about my performance.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application. I understand that any omission, false statement on this application or supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed.

Applicant's Signature: _____
(Please use full legal signature)

(Date)

APPLICANT DISCLOSURE FORM

Pursuant to RCW 43.43.834(2), prospective employees or volunteers who will or may have unsupervised access to children less than sixteen years of age during the course of his or her employment or involvement with this organization must complete this disclosure. Answer YES or NO to each listed item. If the answer is YES to any item, explain in the area provided, indicating the crime(s) or finding(s), the date, and the court(s) involved.

1. Have you ever been convicted of any crimes against persons as defined in RCW 43.43.830(6), 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 rape; first, second or third degree statutory rape; 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 assault; sexual exploitation of minors; first or second 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; first or second degree rape of a child; 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?

ANSWER: No Yes - if yes, explain: _____

2. Have you ever been found in any dependency action under RCW 13.34.04 to have sexually assaulted or exploited any minor or to have physically abused any minor?

ANSWER: No Yes - if yes, explain: _____

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?

ANSWER: No Yes - if yes, explain: _____

4. Have you ever been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor?

ANSWER: No Yes - if yes, explain: _____

5. Have you ever been placed on administrative leave pending investigation of allegations of misconduct?

ANSWER: No Yes - if yes, explain: _____

6. Have you ever been disciplined for misconduct by a past or present employer?

ANSWER: No Yes - if yes, explain: _____

Montesano School District is authorized to request the Washington State Patrol/FBI to make available a prospective employee's or volunteer's record of convictions of offenses against children or other persons, adjudication of child abuse in a civil action, disciplinary board final decisions, and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary board's final decision. Any misrepresentation or willful omission of facts shall be sufficient cause of disqualification of this application or termination of employment.

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.

Applicant Signature: _____ Date: _____

Please return completed application to:
Montesano School District
302 N. Church St.,
Montesano, WA 98563