

Wilson Creek School District

Application for a Certificated Position

Complete this entire form. If there is insufficient space for an answer, attach an additional page with your name on it, and indicate which answer you are continuing. Please print or type your responses.

PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____

Home Address: _____

Home Phone: _____ Email: _____

WA State Teacher Certificate No. _____ Type of Certificate: _____

Date Certificate Issued: _____ Social Security No. _____

Highest Degree: _____ Credits Beyond: _____

Major/Minor: _____
(Example: K-8 Reading)

Praxis Scores: _____

FOR SUBSTITUTE POSITION _____

Area you wish to work in: *(Example: 3-8 grade, or 7-12 science)*

EDUCATION HISTORY

High school graduated from: _____ Date graduated: _____

Higher Education (List education in order of last attended)

Institution Attended	Dates (From – To)	Major/Minor	Degree Granted	Date Graduated or Degree Granted	Other Information

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STUDENT TEACHING EXPERIENCE

School name and location	Grade/Subject	Dates (From – To)

TEACHING EXPERIENCE

School district and location	Position/Subject(s) Taught	Full/Part-time	Dates (From – To)

OTHER EMPLOYMENT EXPERIENCE

Place	Position	Dates (From – To)

Are you presently under contract?: NO YES When will you be available?: _____

Why do you wish to leave your present employer?: _____

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PROFESSIONAL REFERENCES

Please list professional references who are capable of evaluating your ability to perform the work for which you have applied. List superintendents and/or principals under whom you have taught. (It is the applicant's responsibility to notify all referents that they will be asked by the Wilson Creek School District for references concerning the applicant's qualifications.)

Name	Official Position	School District	Phone

OTHER REFERENCES

Name	Position/Employer	Phone

My signature below authorizes Wilson Creek School District to conduct a background investigation, including criminal convictions, driving records, previous employment, and personal references, as part of the application process. I hereby consent to the release of all information related to this investigation, and release the school district from any liability in connection with the use of this information.

I hereby certify that the information contained in this application and otherwise provided by me, as part of the application procedure, is complete and true. I understand that any false or misleading information provided by me will constitute sufficient grounds for disqualification of my application, or, in the event the district employs me, for my dismissal.

Signature

Date

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HAVE YOU BEEN:

- Convicted of any crime against persons (reckless endangerment, simple assault, unlawful imprisonment, communication with a minor for immoral purposes, first degree promoting prostitution, vehicular homicide, incest, indecent liberties, first or second degree extortion, first or second degree manslaughter, first degree burglary, first degree arson, first or second degree robbery, first or second or third degree statutory rape, first or second or third degree assault, aggravated murder, first or second degree murder, first or second degree kidnapping)?:

NO YES

If yes, explain: _____

- Found in any dependency action or by a court in a domestic relations proceeding or in any disciplinary board final decision to have sexually assaulted or exploited any minor or to have sexually assaulted any minor?:

NO YES

If yes, explain: _____

- In the last seven years, released from prison or convicted of any offense that involved drugs, embezzlement, or fraud?:

NO YES

If yes, explain: _____

I, _____ certify (or declare) under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

All answers and statements are true and complete to the best of my knowledge. I understand that any false or misleading answers are cause for rejection of my application or dismissal if employed. I authorize release of information pertaining to previous employment or any other statements in this application. I also understand that that Wilson Creek School District reserves the right to deny consideration of any incomplete employment application.

Signature

Date

Please return application to: Wilson Creek School District
400 Navar Street
PO Box 46
Wilson Creek, WA 98860

If you have any questions, please feel free to contact the district office at 509-345-2541.