

Union Gap School District
3200 South Second Street
Union Gap, WA. 98903

APPLICATION FOR CERTIFICATED EMPLOYMENT
AN EQUAL OPPORTUNITY EMPLOYER

I wish to apply for: Permanent Employment: _____ Substitute Employment: _____

FULL NAME: _____ Soc. Sec. No. _____

Date: _____

PERSONAL INFORMATION (Please type or print)

Other name(s) under which records may be listed: _____
Last First Middle

Present Address: _____ Phone: () _____
Street City State Zip Area Code

Permanent Address: _____ Phone: () _____
Street City State Zip Area Code

Person through whom you may be reached: _____ Phone: () _____

Present position or employment status: _____ Phone: () _____

Date able to begin employment: _____

HAVE YOU EVER BEEN:

1. Convicted of any crimes against persons as listed: aggravated murder; 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?

() NO () YES, SPECIFY: _____

2. Found in any dependency action under RCW 13.34.030 (2) (b) to have sexually assaulted any minor or to have physically abused any minor?

() NO () YES, SPECIFY: _____

3. 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?

() NO () YES, SPECIFY: _____

4. Found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor?

() NO () YES, SPECIFY: _____

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

Are you interested in coaching? If so, what activities: _____

Are you Highly Qualified? Circle one: Yes (provide documentation) No, Not Sure

CERTIFICATE INFORMATION: Have you ever had a certificate revoked? ___No ___ Yes (If yes, identify date, certificate, reason(s).) _____

Do you currently hold a Washington State Teaching Certificate? ___ Yes ___ No

List below any teaching, administrative and special certificates for the State of Washington which you hold or will hold. For Washington State Initial Teaching Certificates and other certificates, be certain to list all endorsements.

Type of Certificate	Endorsements	Issue Date	Expiration Date

ACADEMIC INFORMATION: Starting with **high school**, list in order of attendance all institutions.

Name of Institution City and State	Dates Attended Mo./Yr. to Mo./Yr.	Credits Earned Specify Sem./Qtr.	Degree Earned	Major	Minor

CERTIFICATED SCHOOL EXPERIENCE: (List in order of occurrence) **DO NOT INCLUDE** day-care, student teaching, or substitute experience.

District Name/Address (Street, City, State)	Assignment Grades/Subjects	Dates of Employment Mo./Yr. to Mo./Yr.	Full-Time Yes/No	Reason for Discontinuing Position

LONG-TERM SUBSTITUTE EXPERIENCE: (List in order of occurrence.) **IDENTIFY ALL CERTIFICATED SUBSTITUTE EXPERIENCE OF AT LEAST 20 CONSECUTIVE DAYS IN ONE ASSIGNMENT.**

District Name/Address (Street, City, State)	Assignment Grades/Subjects	Dates of Employment Mo./Yr. to Mo./Yr.	No. of Days Substituted	Name of School Principal

SHORT-TERM SUBSTITUTE EXPERIENCE

Year	District	Approx. No. of Days	Grade Level/Subjects

OTHER EXPERIENCE: (Include military service)

Dates Employed Mo./Yr. to Mo./Yr.	Name of Firm	Reason for Leaving

REFERENCES: Please give five references, especially including superintendents and principals under whom you have taught who have first-hand knowledge of your character, personality, scholarship, and teaching ability.

Name	Address	Phone #	Official Position

All certificated applicants must provide the following for employment consideration:

1. A formal Letter of Application
2. The school district's completed application packet
3. A current Resume
4. "Copies" of ALL post-secondary transcripts (upon hiring, ALL "official transcripts" are to be submitted to the Union Gap Business Manager within 30 work days)
5. A copy of your Washington Teaching Certificate (include any other valid teaching certificates from other states as well)
6. A current placement file and/or at least five current letters of recommendation
7. A fingerprint check must be completed within thirty work days of official hiring

PERSONAL INFORMATION (optional)

Date of Birth: _____ Present Age: _____ Sex: M / F (circle one)

Do you have any physical, mental, or emotional handicaps? Yes _____ No _____

If yes, explain: _____

Race/Ethnic Designation: Please indicate your ethnic background: () American Indian () Black
() Hispanic () Asian () Caucasian () Other, specify: _____

Signature Release

All of the information I have provided in this application is true, correct and complete. I authorize the Union Gap School District No. 2 to inquire with former employers or references and obtain any and all information regarding all job-related background. I release and waive Union Gap School District No. 2, my former employer, and all references from any and all liability in obtaining or disclosing such information. I agree that if I have provided false or incomplete statements, the district may, at its sole discretion, without notice or due process procedures, terminate my employment contract. If such action is taken by the district, the contract shall be deemed void from its inception.

A fingerprint check is required and an inquiry to the Washington State Patrol and FBI will be made.

Signature of Applicant

Date