TOUTLE LAKE SCHOOL DISTRICT

APPLICATION FOR CERTIFIED

EMPLOYMENT

Check Area(s) of Interest:
☐ Full Time Teaching
☐ Part Time Teaching
☐ Substitute Teaching
☐ Administration
☐ Extra Curricular
☐ Other
Specify

An Equal Opportunity Employer

Date of Application	

Please type or use ink in completing this form

Email Address

Date of Availability

PERSONAL DATA

Check the area(s) for which you are applying Kindergarten Grade 1-6 Grade 7-8 Grade 9-12 Special Education Administration	Social Security Number - Not needed unless hired	
Number Street Apt. No. Phone		_
Phone/	Address	
City State Zip Code Home Business Check the area(s) for which you are applying	Number Street	Apt. No.
Check the area(s) for which you are applying Kindergarten Grade 1-6 Grade 7-8 Grade 9-12 Special Education Administration	Phone/	
☐ Kindergarten ☐ Grade 1-6 ☐ Grade 7-8 ☐ Grade 9-12 ☐ Special Education ☐ Administration ☐ Grade 9-12 ☐ Special Education ☐ Grade 9	City State Zip Code Home Bus	iness
	Check the area(s) for which you are applying	
List below in order of preference the grade levels, specific subjects, or positions for which you wish to be considered.	☐ Kindergarten ☐ Grade 1-6 ☐ Grade 7-8 ☐ Grade 9-12 ☐ Special Education ☐	Administration Other
	List below in order of preference the grade levels, specific subjects, or positions for which you w	ish to be considered.
1 3	1 2 3	
List any interests in special programs (i.e., team teaching, library, media, career education, art areas, coaching, advising	List any interests in special programs (i.e., team teaching, library, media, career education, art are	eas, coaching, advising, etc.

INSTRUCTIONS

- 1. Only complete applications received by the specified deadline will be referred to the screening committee for consideration.
- 2. It is your responsibility to have the materials listed below emailed to HR@ToutleSD.org or forwarded to the following address to establish a complete application file.

Toutle Lake School District District Office 5050 Spirit Lake Highway Toutle, WA 98649

- a. Completed and signed application form. Application must be in its entirety; "see resume" is not acceptable.
- b. Up-to-date resume.
- c. Letters of recommendation. Please send copies rather than the originals because the letters will be retained with your application.
- d. School transcripts/placement files applicable to the position for which you are applying.
- e. Any additional materials as requested.
- 3. Applications are retained and considered active for six months. Applications will be reactivated at your written request for an additional six month period. You must submit a written request asking that your application be pulled for any/all open positions as they occur.
- 4. Present or past employers (supervisors) will be contacted as part of the selection process.
- 5. Please contact the Personnel Office at HR@ToutleSD.org or (360) 274-6182 if you have questions regarding your application and/or vacancies.

All applications will be accepted without regard to race, color, national origin, gender or disability.

ACADEMIC PREPARATION Name of Institution City and State Date Major/Minor Degrees & Dates From To **CERTIFICATES/LICENSES** List below teaching, ESA, administrative, and special certificates/licenses held. Type of Certificate State Level/Endorsement Date Issued **Expiration Date** PROFESSIONAL EXPERIENCE List below your last four employers, beginning with current or most recent

Dates: Month/year	Name, Address, Zip and Telephone Number of Employer	Position Held Supervisor/Telephone Work/Home	Reason For Leaving
From:			
To:			
From:			
То:			
From:			
From:			
То:			

(Attach additional sheets, if necessary, using same format.)

	loyed, or last employer if not currently employed.	Telephone Numbe
Name/Position/Relationship	Company Name Address	Work/Home
	l	
ERSONAL INFORMAT	ION	
sposition. (ithin the last seven years have you e	ver pled guilty, been convicted, fined, imprisoned o or ordinance, excluding minor traffic violations?	r placed on probation for
river's License Number:	State:	
PPLICANT'S CERTIFIC	CATION AND AGREEMENT	
ll of the information I have provided i	in this application is true, correct, and complete. I au	thorize Toutle Lake School Distri
ii oi tiic iiiioiiiiatioii i iiave piovided i		
	s and/or references and obtain any and an informati	<i>5 7 7 7 7 7 7 7 7 7 7</i>
130 to inquire with former employers ound. I also authorize Toutle Lake So	chool District #130 to check for any conviction(s) on	record. I release and waive Tout
30 to inquire with former employers ound. I also authorize Toutle Lake So ake School District #130, my former	chool District #130 to check for any conviction(s) or employers and all references from any and all liabi	record. I release and waive Tour lity in obtaining or disclosing su-
130 to inquire with former employers round. I also authorize Toutle Lake So ake School District #130, my former	chool District #130 to check for any conviction(s) or employers and all references from any and all liability ovided false or incomplete statements, the district	record. I release and waive Tout lity in obtaining or disclosing suc
130 to inquire with former employers round. I also authorize Toutle Lake Sake School District #130, my former aformation. I agree that if I have pro-	chool District #130 to check for any conviction(s) or employers and all references from any and all liability ovided false or incomplete statements, the district	record. I release and waive Tout lity in obtaining or disclosing suc

APPLICANT DISCLOSURE FORM

Pursuant to RCW 43.43.830-834, prospective employees or volunteers who will or may have unsupervised access to children under sixteen years of age during the course of their employment or involvement with this organization must complete this disclosure. Answer YES or NO to each 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 children or other persons as defined in RCW 43.43.830

	ping; first, second or the statutory rape; first or semanslaughter; first or semanslaughter; first or sepromoting prostitution; tation of minors; first or 26.44.020; first or second molestation; first child; patronizing a juverotic material to a min	vs: aggravated murder, first or second degree murder; first or aird degree assault; first, second, or third degree rape; first, selected degree robbery; first degree arson; first degree burglar econd degree extortion; indecent liberties; incest; vehicular has communication with a minor; unlawful imprisonment; simper second degree criminal mistreatment; child abuse or neglected degree custodial interference; malicious harassment; first, or second degree sexual misconduct with a minor; first or second prostitute; child abandonment; promoting pornography for; custodial assault; violation of child abuse restraining order indecent exposure; or any of these crimes as they may be re-	econd, or third degree ry; first or second degree nomicide; first degree le assault; sexual exploi- et as defined in RCW , second, or third degree cond degree rape of a ; selling or distributing er; child buying or sell-
	ANSWER	If "YES," explain here.	
2.	Have you ever been for exploited	and in any dependency action under RCW 13.34.040 to have any minor or to have physically abused any minor?	sexually assaulted or
	ANSWER	If "YES," explain here.	
3.		n found by a court in a domestic relations proceeding under Texploited any minor or to have physically abused any minor?	
	ANSWER	If "YES," explain here.	
4.	Have you ever been for exploited	and in any disciplinary board final decision to have sexually any minor?	or physically abused or
	ANSWER	If "YES," explain here.	
all	hires who will have regu	0 is required to obtain a record check from the Washington S ularly scheduled unsupervised access to children. Any misre ufficient cause for disqualification of this application or term	presentation or willful
	rsuant to RCW 9A.72.08 e foregoing is true and co	35, I certify under penalty of perjury under the laws of the Starrect.	ate of Washington that
Αį	oplicant Signature		
Da	ate and Place		