



PATERSON SCHOOL DISTRICT No. 50

P.O. Box 189 - Paterson, WA 99345 - Phone (509)875-2601 - Fax (509) 875-2607

AN EQUAL OPPORTUNITY EMPLOYER

Application for Certificated Position:

Date: _____

Position Sought: _____

Last Name _____ FirstName _____ Middle Initial _____ Date of Birth _____

Street Address _____ City _____ State _____ Zip _____

Home Phone (_____) _____ Other Phone (_____) _____

Email: _____

Social Security No. _____ Other Names Employed Under _____

EDUCATION: (List all colleges attended in reverse chronological order or attach a resume)

Name of Institution City and State	Dates Attended Mo/Yr to Mo/Yr	No. Years Completed	Degree Earned	Major Qtr.Hrs	Minor Qtr. Hrs.

SPECIAL TRAINING (Please provide number of contact class hours in box provided or include on resume)

INSTRUCTION	CURRICULUM	SPECIALIZED STUDENT NEEDS	LEADERSHIP
<input type="checkbox"/> AVID <input type="checkbox"/> GLAD <input type="checkbox"/> LEARNING STYLES <input type="checkbox"/> INQUIRY METHODS <input type="checkbox"/> OTHER TRAINING	<input type="checkbox"/> COMPUTER TRAINING <input type="checkbox"/> CHILD ABUSE/PERSONAL SAFETY <input type="checkbox"/> SEX EQUITY AWARENESS <input type="checkbox"/> MULTI-CULTURAL AWARENESS <input type="checkbox"/> OTHER TRAINING	<input type="checkbox"/> LEARNING DISABILITIES <input type="checkbox"/> GIFTED <input type="checkbox"/> Remedial <input type="checkbox"/> Drug/Alcohol Problems <input type="checkbox"/> COOPERATIVE LEARNING <input type="checkbox"/> OTHER	<input type="checkbox"/> ASSESSMENT <input type="checkbox"/> SUPERVISION/EVALUATION <input type="checkbox"/> SECURITY/SAFETY <input type="checkbox"/> CONFLICT RESOLUTION <input type="checkbox"/> SITE-BASED MANAGEMENT <input type="checkbox"/> OTHER

List any other special training you feel is pertinent to the position for which you are applying.

CERTIFICATION (Enclose copies of all current Washington State certificates you hold. It is necessary to have complete, accurate information about the Washington state certificate(s) you hold, in order for us to give serious consideration to your application. You must hold a valid Washington state certificate, or provide documented evidence that such a certificate will be issued in the near

CERTIFICATES HELD List only current, valid Washington state certificates which have actually been issued to you.)

	Type	Number	Date Issued	Expiration Date	Reason for Leaving
TEACHING					
ESA					
VOCATIONAL					
ADMINISTRATOR					

What is your present position? _____

Titles, duties, additional assignments

Are you under contract? _____ If yes, until when? _____

CERTIFICATED EXPERIENCE (List experience only for those positions which were under contract and required appropriate state certification, performed after receiving a Bachelor's degree in the educational field. Some positions - counselors, nurses, etc. - may receive work-related credit. Successful applicants will be required to provide proof of previous certificated experience. Employment verification forms will be provided by the superintendent's office.)

DISTRICT NAME ADDRESS (CITY, ST, ZIP)	GRADE-SUBJECT TAUGHT AND ADMIN. EXPERIENCE	DATES OF EMPLOYMENT	TOTAL YEARS (SPECIFY PART OR FULL-TIME)	REASON FOR LEAVING

REFERENCES — List the names of two personal references. These can also be included on a reference sheet with resume.

Name	Position	Address	Telephone Number

REFERENCES — List the names of four current or former supervisors who know of your professional work and qualifications.

Name	Position	Address	Telephone Number

SECOND LANGUAGE (These questions relate to your ability to communicate in a language other than English.)

Spanish _____ Other: Name of language _____

	LIMITED	CONVERSATIONAL	FLUENT
Verbal Ability			
Writing Level			
Reading Level			

**QUESTIONS - On a separate sheet of paper briefly answer the following questions:
NOT NECESSARY IF APPLYING FOR SUBSTITUTE ONLY POSITION.**

1. Describe your leadership or teaching style. How do you see that working at Paterson?
2. What do you believe are the most important factors to include when designing a lesson?
3. How would you provide for individual learning differences in the classroom?
4. From your prior experiences, describe a difficult classroom situation that arose and how you handled it.
5. What do you believe are the greatest challenges facing educators in a small rural community?
6. How do you see the power of technology transforming education?

Have you ever been arrested, pleaded guilty, been convicted, fined, imprisoned or placed on probation for violation of any law, police regulation or ordinance (excluding minor traffic violations)? A conviction record will not necessarily bar you from employment. Yes _____ No _____

If yes, please explain: _____

Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any position teaching or otherwise? Yes _____ No _____

If yes, please explain: _____

Have you ever had a teaching certificate revoked, suspended or denied, or have you voluntarily relinquished a teaching certificate to avoid revocation procedures?

Yes _____ No _____

If yes, please explain:

I hereby certify that all of the information I have provided in this application is true and correct. I give my permission for Paterson School District to contact any references or prior employers given in conjunction with this application. I further agree that if I am employed, I will provide verification of my certification, education and experience. I also agree that falsification of any part of this application shall be sufficient cause for dismissal. References and personal information which become a part of this application will be regarded as confidential and shall not be revealed to me.

Signature _____ Date _____

APPLICATION INSTRUCTIONS: SCAN and email all documents to: melindawh@patersonschool.org or
Mail letter of application, completed application form, and resume to:

PATERSON SCHOOL
ATTN: Melinda White
PO Box 189
Paterson, WA 99345

In order to assure that you will have a completed file in our office, please check to make sure you have taken care of the following:

- Completed application form, letter of application and responses to the nine questions above (if required).
- A current resume
- Minimum of three current letters of recommendation but no more than five
- Affirmative action survey signed
- Photocopy of Washington State teaching/administrative certificate (if available)

Paterson School District is an EEO/AA Employer

Paterson 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 employees have been designated to handle questions and complaints of alleged discrimination: Civil Rights Coordinator and Title IX Coordinator: Corey Ingvalson, 509-875-2601, corevi@patersonschool.org; and: Section 504 Coordinator: Teri Tucker, 509-875-2601 terit@patersonschool.org, PO Box 189, 51409 Prior Avenue, Paterson, WA 99345.



**Applicant Disclosure, pursuant to RCW 43.43.834
CHILD AND ADULT ABUSE INFORMATION ACT**

Answer YES or NO to each listed item. If the answer is YES to any item, explain in the area provided, indicating the charge or finding, the date, and the court(s) involved.

1. Have you ever been convicted of any crimes against children or other persons, 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 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 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; 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?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

2. Have you ever been convicted of crimes relating to the financial exploitation if the victim was a vulnerable adult, as follows: first, second, or third degree extortion; first, second or third degree theft; first or second degree robbery; forgery?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

3. Have you ever been found in any dependency action under RCW 13.34.030 (2) (b) to have sexually assaulted or exploited any minor or to have physically abused any minor?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

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

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

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

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

6. Have you ever been found in any protection proceeding under chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

7. Are you presently charged with, but not convicted of, any of the offenses described in questions 1-6?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

8. Are you presently under investigation regarding any of the offenses described in questions 1-6?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

9. Have you entered into any settlement agreement with any former employing school district involving your employment at that school district?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

10. Have you ever had a teaching certificate revoked? ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

11. Have you ever been convicted of a crime related to drugs, manufacture, delivery, or possession with intent to deliver a controlled substance?

ANSWER _____ IF YES, PLEASE EXPLAIN BELOW:

Pursuant to RCW 9A.72.085,1 certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant Signature _____

Date and Place _____

Witness _____

Business or Organization _____

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APPLICANT RELEASE

I, _____, authorize all of my current and former school district employers to release all information related to substantiate sexual misconduct to the Paterson School District. This authorization includes release of copies of all documents relating to substantiated sexual misconduct by me, if any, to the Paterson School District in accordance with Chapter 28A.410 RCW and WAC 180.87.080. I release all of the employers listed below and employees acting on their behalf from any and all liability for providing the information described above.

I certify that the following is a complete list of current and former school districts for which I have worked:

School District	Position(s) Held	Dates of Employment	Names Used While Employed

Applicant's Signature: _____ Date: _____



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Applicant Flow Data Profile

Confidential

It is the policy of the Paterson School District to ensure equal opportunity in employment, recruitment, training, promotion, transfer, layoff, termination, compensation and benefits. These policies will be administered without regard to race, religion, national origin, marital status, sex, age (except in cases where sex or age is a bona fide occupational qualification approved by the Washington State Human Rights Commission) or the presence of handicaps.

This form is not to be considered a part of the Application for Employment form. Upon receipt, this sheet will be immediately sent to the Compliance Officer and filed apart from the employee's application. All information will be considered strictly confidential and will be used for Affirmative Action and Title IX statistical data purposes only.

For the purpose of effectively implementing the district's Affirmative Action Plan, we would appreciate your providing the information below. This information is neither a condition of employment nor mandatory on your part. If you prefer not to reply, check the answer "NO" below and leave the remainder of the form blank.

I understand the above and volunteer this information: Yes _____ No _____

Name _____ Position Applied for _____
Home City & State _____ Date _____

Sex: Male Female

Race: _____ Hispanic (or person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, Asian or Pacific Islander American Indian or Alaskan Native Black Black (not of Hispanic origin) White (not of Hispanic origin) American, or other Spanish culture or origin

Age: _____ 39 years or younger _____ 40 years and older

Do you consider yourself to have significant physical, mental, or sensory limitations or disabilities? Yes _____ No _____

Please Specify, if yes _____

Did you serve in the United States Armed Forces on active duty between August 5, 1964 and May 7, 1975 for a period of 180 days or more? Yes _____ No _____

If you answered yes, were you honorably discharged? Yes _____ No _____

Are you entitled to receive Veterans preference? Yes _____ No _____

Are you eligible to receive Disabled Veterans preference? Yes _____ No _____