



Brinnon School District No. 46

46 SCHOOLHOUSE ROAD
BRINNON, WA 98320

Phone: (360) 796-4646

| CERTIFICATED APPLICATION | | | |
|---|--|--|---------------------|
| Date: | | <i>Your social security number is not required at the time of application, however a copy of the original will be necessary upon hiring for federal income tax, state retirement and internal record keeping purposes.</i> | |
| Name: | | Alias/Maiden Name: | |
| Mailing Address~City~State: | | | |
| Phone: | | Cell Phone: | E-Mail: |
| PREFERENCES | | | |
| Prioritize the grade level you prefer to teach. | | | |
| Elementary (K-5) | | Middle School (6-8) | Special Education |
| Administration: | | Other: | |
| Please list up to four subject areas you prefer to teach in order of priority. | | | |
| 1. | | 2. | |
| 3. | | 4. | |
| Certification, Authorization and Release | | | |
| | | | <i>Initial Here</i> |
| I hereby certify that all the information I provide in this application is true and correct. | | | |
| I authorize the Brinnon School District to make any investigation of my personal, educational, vocational and employment history. | | | |
| I further authorize any current/former employer, person, firm, corporation, educational or vocational institution, or government agency to provide the Brinnon School District with information regarding me. | | | |
| I hereby release and discharge the Brinnon School District and those who provide information from any and all liability as a result of furnishing and receiving information. | | | |
| I understand and agree that falsification of any part of this application shall be sufficient cause for dismissal or refusal to hire. | | | |
| Signature | | | Date |

Educational Training
College and/or University

| Name of School | Location | Dates Inclusive | Degree | Date Received | Major | Minor |
|----------------|----------|-----------------|--------|---------------|-------|-------|
| | | | | | | |
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Teaching Experience

List most recent experience first. Include student teaching only if you are a beginning teacher.

| Dates Inclusive | Name of Employer | Location | No. Years | Type of Work | Reason for Leaving |
|-----------------|------------------|----------|-----------|--------------|--------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Other Experience

| Dates Inclusive | Name of Employer | Location | No. Years | Type of Work | Reason for Leaving |
|-----------------|------------------|----------|-----------|--------------|--------------------|
| | | | | | |
| | | | | | |
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References

Please list three of your most recent references, including superintendents and principals.

| Name | Address | Phone | Position |
|------|---------|-------|----------|
| | | | |
| | | | |
| | | | |

Certification

List below teacher, administrative and professional certificates and/or licenses held.

| Type of Certificate/License | Date Issued | Expiration Date | Endorsement | State |
|-----------------------------|-------------|-----------------|-------------|-------|
| | | | | |
| | | | | |
| | | | | |

NARRATIVE

Please respond to the questions below in your own handwriting.

1. State briefly what and how you can contribute to the Brinnon School District:

2. Describe the type of teaching/professional situation in which you would like to work and explain why.

**Washington State Patrol Criminal History Record
Request for Criminal History Information
Child/Adult Abuse Information Act
Reference RCW 10.97 , 43.43.830 – 43.43.845**

Today's Date: / ____ / ____

Please Print

| | | | | |
|------------------------------------|--|-------------------------------|---------------------------------|--------------------|
| NAME: | | First | Middle | Last |
| Alias/Maiden Name: | | First | Middle | Last |
| Social Security # | | - | - | |
| Driver's Lic. Number/State: | | | | |
| Date of Birth: | | Male <input type="checkbox"/> | Female <input type="checkbox"/> | Race: _____ |
| Mailing Address: | | | | |
| City | | Zip | | |
| Home Phone: | | Cell Phone: | | |
| Email Address: | | | | |

APPLICANT SIGNATURE: _____

| |
|--|
| OFFICE USE ONLY |
| Verify applicant's name matches with valid (unexpired) driver's license <input type="checkbox"/> |
| Date of clearance: _____ Initial: _____ |
| Results attached <input type="checkbox"/> |

Applicant Background/Disclosure Questionnaire

The information given below is confidential.

| | | |
|--|------------|-----------|
| Print Name: | Date: | |
| | Yes | No |
| 1. Have you ever been convicted of a crime? (Exclude civil infractions, such as minor traffic citations.) For purposes of this question “conviction” means all adverse dispositions, including a finding of guilty, a plea of guilty or nolo contendere, an Alford plea, a stipulation to the facts, a deferred or suspended sentence or deferred prosecution. If yes, please attach an explanation of the nature of this crime, place, date and court. A conviction record will not necessarily bar you from District employment. | | |
| 2. Are you presently charged with, but not convicted of, a crime? (Exclude civil infractions such as minor traffic citations.) If yes, please attach an explanation of the nature of this crime, place, date and court. A pending criminal charge will not necessarily bar you from District employment. | | |
| 3. Some applicants who have a mental, physical or sensory disability require an accommodation or assistance to enable them to perform the essential functions of the position sought. Are you able to perform the essential functions of the position for which you are applying (with or without accommodation)? If an accommodation is needed please describe the nature of the accommodation. | | |
| Certification, Authorization and Release | | |
| <i>Initial Here</i> | | |
| I hereby certify that all the information I provide in this application is true and correct. | | |
| I authorize the Brinnon School District to make any investigation of my personal, educational, vocational and employment history. | | |
| I further authorize any current/former employer, person, firm, corporation, educational or vocational institution, or government agency to provide the Brinnon School District with information regarding me. | | |
| I hereby release and discharge the Brinnon School District and those who provide information from any and all liability as a result of furnishing and receiving information. | | |
| I understand and agree that falsification of any part of this application shall be sufficient cause for dismissal or refusal to hire. | | |

I declare under the penalty of perjury of the laws of the State of Washington that the foregoing answers and all information included in my application are true, complete and correct. If the information provided or answer(s) to any question on the Application or Background Questionnaire change prior to my being hired, I understand and agree to immediately notify the Brinnon School District. I agree that if I have failed to update the Background Questionnaire or if I have provided false, misleading or incomplete information on the application or background questionnaire, the Brinnon School District may, in its sole discretion, terminate my services/employment.

| | |
|-----------|------|
| Signature | Date |
|-----------|------|

Directions and General Information for Certified Applicants

Thank you for your interest in the Brinnon School District. Please read through the application materials carefully. Only completed applications will be considered for screening. You are encouraged to contact Human Resources to inquire about the status of your application and/or the open position for which you applied.

The following documents are required to complete your application:

| | |
|--|--|
| | Brinnon School District completed and signed application form. |
| | Letter stating your interest specific to the position. |
| | Current Resume |
| | College Placement or Credential File <ul style="list-style-type: none"> • Have your college placement service send the file directly to the Personnel Office. (If you do not have a placement file, submit a minimum of three (3) current letters of reference.) |
| | Copies of College Transcripts <ul style="list-style-type: none"> • Transcripts are not normally included in your placement file. Copies are acceptable for the application process. Official transcripts are required upon hire. |
| | Copy of Washington State Teaching Certificate (front and back). <ul style="list-style-type: none"> • If you have not received your certificate, submit a copy immediately upon receipt. |
| | Disclosure Form |
| | Washington State Sexual Misconduct Disclosure Release <ul style="list-style-type: none"> • One form is included with this application packet. Complete one form for each school district you have been employed with. Duplicate forms as needed or contact Human Resources for additional copies. |
| | Other information the candidate feels is important for consideration |
| | Optional: Affirmative Action |

STATEMENT OF NONDISCRIMINATION

Brinnon School District does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the 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 in its programs and activities and provides equal access to the *Boy Scouts and other designated youth groups. The following employee has been designated to handle questions and complaints of alleged discrimination:

Title IX Coordinator
Patricia Beathard,
Superintendent
46 Schoolhouse Road
Brinnon, WA 98320
Email: pbeathard@bsd46.org
360.796-4646

**Section 504/ADA Coordinator
and 28A.642 RCW**
Patricia Beathard, Superintendent
46 Schoolhouse Road
Brinnon, WA 98320
Email: pbeathard@bsd46.org
360.796.4646

Compliance Coordinator for 28A.640
Patricia Beathard, Superintendent
46 Schoolhouse Road
Brinnon, WA 98320
Email: pbeathard@bsd46.org
360.796.4646

When an offer of employment is made, new employees who will or may have unsupervised access to children, developmentally disabled persons, or vulnerable adults must complete a background check for criminal history, including a fingerprint check, by the Washington State Patrol and the Federal Bureau of Investigation (FBI), as well as a written disclosure of specified criminal convictions and civil or disciplinary board findings. Any offer of employment is conditional upon the successful outcome of the criminal history background check and approval by the Brinnon School District Board of Directors. If you have further questions, please contact our office at 360-796-4646.

Union membership or representation fee is a requirement for employment in a certificated classification, unless the employee claims a "bona fide" exemption.

Applications may be submitted as follows:

Mail: Superintendent Patricia Beathard
(INSERT POSITION) TEACHER APPLICATION
46 Schoolhouse Rd,
Brinnon, WA 98320

E-mail: pbeathard@bsd46.org with Subject line of (INSERT POSITION) TEACHER APPLICATION

Fax: 360-796-4113

*It is not possible to interview everyone who complete an application.
Only finalists will be interviewed, and those interviewed will be notified regarding final selection.*