



CERTIFICATED
APPLICATION
FOR
EMPLOYMENT

Mr.
Name Mrs. _____
Ms. Last First Middle

Social Security Number _____

Current Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Phone _____
Home Business Message

Position for which you are applying:

Date available for work: _____

California Credentials Now Held:

Type _____ Expires _____

Type _____ Expires _____

PLEASE ATTACH A COPY OF THE ABOVE CREDENTIAL(S)

Credential applied for: _____ Date Submitted: _____

Have you passed the CBEST? Yes No If no, date you intend to test? _____

Are you or have you ever been a member of the California State
Teachers Retirement System? Yes No

Do you speak a foreign language? Yes No If yes, which language(s)? _____

College or University Education

Name and Location of Institution	Attended From To	Graduated Degree Date	Major	Minor

Number of semester units of graduate work beyond BA/BS degree _____

Number of semester units of graduate work beyond MA/MS degree _____

Positions Held in Education

List last position first. Indicate type: Regular, substitute, or student teaching.

Type	Dates From To	Position Title, Grades or Subject	School District	District Address

Extra Curricular Interests and Related Information

Please provide below information that may be directly related to your professional background.

My placement papers are on file with the following placement office:

Address _____ City _____

State _____ Zip _____

Under the name of: _____

(It is the applicant's responsibility to have his/he placement file forwarded to the District Office.)

Professional References

Include only those who have knowledge of your teaching and/or administrative experience, including student teaching. Previous supervisors may be phoned regarding your performance.

Name	Position	Address	Phone Number

Has your credential ever been suspended? Yes No

Have you ever been dismissed, or asked to resign from any position requiring certification? Yes No

Have you ever been convicted for anything other than a minor traffic violation? Yes No

Have you ever left a regular certificated position at a time other than the end of the school year? Yes No

For each of the above items answered YES, explain the circumstances in the comments section.

Experience Other Than Teaching

Begin with most recent experience. Give details on experience which you believe meets the requirements for this position. Also, list any volunteer experience which you feel helps you meet the requirements of the position for which you are applying.

Period of Employment		Job Title and Duties	Name, Address, Phone Number of Employer/Supervisor
From	To		

Check if you have qualifications which equip you to work with minority groups and multi-ethnic programs and include a brief explanation with your application.

Additional comments (optional)

Can you perform the essential functions of this job without an accommodation? Yes ___ No ___

If not, what reasonable accommodation will you need to perform the essential functions?

I hereby certify that all statements made hereon are true and correct to the best of my knowledge and authorize investigation of all statements herein recorded. I agree and understand that any misstatement of fact herein will cause forfeiture on my part to any employment or payment as an employee in the service of the Santa Rita Union School District. I release from all liability persons and organizations reporting information required by this application.

Signature of Applicant

Date

For Office Use:

Return Application to:

Santa Rita Union School District
57 Russell Road
Salinas, CA 93906-4300
(831) 443-7200

**AFFIRMATIVE ACTION/EQUAL EMPLOYMENT
OPPORTUNITY EMPLOYER
MALE/FEMALE**