



Anacortes School District #103

2200 "M" Avenue, Anacortes, Washington 98221

www.asd103.org

SUBSTITUTE CERTIFICATED

APPLICATION FOR EMPLOYMENT

CERTIFICATED PERSONNEL

General Information for the Application Process

1. The following guidelines for completing application materials should be followed in completing the application process. Please complete the application form itself in your own handwriting, using ink.
2. All materials should be directed to: Kristi Lang, Substitute Coordinator, Anacortes School District, at the address above.
3. Applications for certificated substitutes are complete upon receipt of:
 - a. the application form;
 - b. resume;
 - c. three letters of recommendation
 - d. Washington State Teaching Certificate (original, to be copied);
 - e. Social Security card and Driver's License (for completion of Employment Eligibility Verification Form I-9);
 - f. unofficial copies of the candidate's college transcripts;
 - g. WSP and FBI fingerprint results in OSPI or proof of printing;
 - h. Washington State Sexual Misconduct Disclosure Release Form;
 - i. HIV/AIDS training (verification of prior training or the district will provide); and
 - j. Immunization history.

I. PERSONAL INFORMATION

Last Name	First Name	Middle Initial	Date of Application
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Other names used/maiden name, if applicable

Present Address	City	State	Zip	Telephone
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Permanent Address	City	State	Zip	Telephone
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Present Position (title, duties)

Are you under contract? Yes _____ No _____ If "Yes," until when? _____

II. PREFERENCE FOR TYPE OF POSITION

Check your area of preference. If interested in being considered for more than one area, prioritize your choices with "1" being your first choice.

Elementary_____ Secondary_____ Special Education_____

III. ELEMENTARY TEACHER PREFERENCES

Prioritize the grade level(s) or subject area(s) in which you hold certification and/or prefer to teach, with "1" being your first choice.

PK_____ K_____ Primary_____ Intermediate_____ 7th & 8th_____

PE Specialist_____ Reading Specialist_____ Music Specialist_____ Art_____

IV. SECONDARY TEACHER PREFERENCES

Prioritize the subject area(s) in which you hold certification and/or prefer to teach, with "1" being your first choice.

_____Agriculture

_____Bilingual Education

_____Business Education: Keyboarding_____ Computer Applications_____ Accounting_____

_____English/Language Arts: English_____ Journalism_____ Speech_____ Debate_____

_____English as a Second Language

_____Fine Arts: Art_____ Drama_____

_____Foreign Language: Spanish_____ French_____

_____Health/Physical Education: Health_____ P.E. (specify)_____

_____Home and Family Life: Cooking_____ Sewing_____ Child Development_____

_____Industrial Technology: Engineering-Related_____ Auto Tech_____ Woods_____ Communications_____

_____Mathematics: Algebra_____ Geometry_____ Calculus_____ Computer Science_____

_____Music: Vocal_____ Instrumental_____

_____Science: Biology_____ Chemistry_____ Earth Science_____ Physics_____

_____Social Studies: Geography_____ Economics_____ History_____ Psychology_____

_____Political Science_____ Sociology_____ Humanities_____

_____Traffic Safety

_____Others (specify)_____

V. SPECIAL EDUCATION TEACHER PREFERENCES

Prioritize special education type and grade level with "1" being your first choice.

Grade Level: Preschool_____ K-3_____ 4-6_____ 7-8_____ 9-12_____

Organization: Resource Room_____ Self-Contained Class_____

Handicapping: Developmentally Delayed_____ Behaviorally Disabled_____

Condition: Health Impaired_____ Hearing Impaired_____ Deaf/Blind_____

Visually Impaired_____

Mentally Retarded: Mild_____ Moderate_____ Severe_____

Orthopedically Impaired_____ Multi-handicapped_____ Learning Disabled_____

VI. EDUCATION

List all college attended, beginning with the most recent. **If hired, official transcripts of all college work must be furnished.**

Name of Institution City, State	Dates Attended	Degree or Diploma And Date Received	Major and Minor	GPA	Quarter Hours After B.A.

VII. SPECIAL TRAINING

Identify any areas listed below in which you have expertise.

Instructional Improvement

- _____ ITIP
- _____ TESA
- _____ Cooperative Learning
- _____ Peer Coaching
- _____ Whole Language Model
(Integrated Language Arts)
- _____ Other (specify)

Curriculum

- _____ AIDS Education
- _____ Computer Training
- _____ Math/Problem Solving
- _____ Multicultural Awareness
- _____ Sex Education
- _____ Drug/Alcohol Problems
- _____ Other (specify)

Student Needs

- _____ Child Abuse
- _____ Gifted
- _____ Language Learning/
Dyslexia
- _____ Remedial Learning
- _____ Students at Risk
- _____ Other (specify)

VIII. OTHER RELATED DATA

Professional or civic organizations in which you maintain membership: _____

Honors received: _____

Travel (dates and places): _____

Hobbies: _____

IX. CERTIFICATED EXPERIENCE

Experience will be granted for those positions which required state certification and were performed after receiving a bachelor's degree in an educational field. The district shall determine final approval of experience. If offered a position, proof of previous experience will be required for salary placement and employment verification forms will be provided.

List most recent experience first. Teachers with more than one position in the same school system should list each position. Use a separate sheet of paper if necessary.

District/School Address/Phone	Subjects Taught Positions Held	Dates M/Y to M/Y	Total Years/Mos.	Reason(s) For Leaving

X. PRACTICE TEACHING OR INTERNSHIPS

Applicants who have not held a contracted position or who have had only one position must list coordinating public school supervising teacher or administrator (for internship).

District Address/Phone	School	Grades/ Subjects	Dates M/Y	Supervising Teacher

XI. OTHER EXPERIENCE

List work experience other than teaching since high school. **Include any military experience.**

Employer Address/Phone	Your Position/ Job Assignment	Name of Supervisor	Dates M/Y to M/Y	Reason(s) For Leaving

XII. REFERENCES

List three unrelated individuals who can provide professional and/or character references

Name	Address	Telephone	Official Position
		()	
		()	
		()	

XIII. CERTIFICATES HELD

List current, valid Washington State certificates which have actually been issued to you, and **enclose a photocopy of each.**

Type	Number	Date Issued	Expiration Date	Endorsements

XV. APPLICANT'S STATEMENT

I hereby certify that all the information given is true to the best of my knowledge.

If offered a permanent or substitute position, I understand that false or misleading information given in my application or interview(s) may result in discharge. I further understand that I will provide verification of my certification, education, and experience, and agree to accept assignments to subjects and activities as made by the superintendent and school board and to abide by all rules and regulations of the district.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision, and I agree that the references and personal information which become a part of this application will be regarded as confidential and shall not be revealed to me.

Within the last seven years have you ever pled guilty, been convicted, fined, imprisoned, or placed on probation or violation of any law, police regulation, ordinance, excluding minor traffic violations? A conviction record will not necessarily bar you from employment.

Yes _____ No _____

If yes, please explain. _____

Within the last ten years have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any position?

Yes _____ No _____

If yes, please explain. _____

Signature of Applicant

Date*

* Applications will be kept on file for a period of one year from this date.

“Anacortes School District is An Equal Opportunity Employer”

Anacortes School District #103 complies with all state and federal rules and regulations and does not discriminate on the basis of race, creed, color, national origin, families with children, sex, marital status, sexual orientation, age, Vietnam-era or disabled Veteran status, or the presence of any sensory, mental or physical disability or the use of a trained dog guide or service animal by a disabled person. This holds true for all district employment and opportunities as well as all students who are interested in participating in educational programs and/or extra-curricular school activities. Inquiries regarding compliance and/or grievance procedures may be directed to the school district's Title IX/RCW 28A.640 Officer and/or Section 504 Coordinator.

Title IX/RCW 28A.640 Officer: Cindy Simonsen
Section 504 Coordinator: Maggie Thompson
2200 M Avenue ♦ Anacortes, WA 98221
(360) 293-1200

Anacortes School District is an Equal Opportunity Employer

Anacortes School District is committed to an affirmative action program that provides for the recruitment of women, people of color, people with disabilities, people 40 or over, and veterans. In order to implement this program, the Anacortes School District requests that you provide the following information. You are not required to do so, but if you choose not to furnish this information, the employer is required to note race, national origin, and gender under federal law on the basis of a visual observation or surname. A decision not to provide this information will not result in any adverse treatment of your application for employment. This information will be kept confidential.

Name: _____

Date: _____

GENDER:

Female

Male

ETHNIC GROUP:

African American (not of Hispanic origin)

American or Alaskan Indian (Tribal Affiliation _____)

Asian/Pacific Islander

Caucasian (not of Hispanic origin)

Hispanic

Other (specify _____)

DISABLED STATUS:

Do you have a physical, sensory, or mental condition that would affect your working conditions?

_____ Yes _____ No

AGE GROUP:

Are you in the protected age group (age 40 or over) _____ Yes _____ No

VETERAN STATUS:

Veteran _____ Yes _____ No

Disabled Veteran _____ Yes _____ No

Applicant Disclosure Form
Pursuant to RCW 43.43.830



Anacortes School District #103

Applicant Disclosure Form Pursuant to RCW 43.43.830

Please complete the following questions and sign the affidavit. Any falsification or deliberate misrepresentation in the completion of this form including omission of a material fact can be grounds for denial of employment with the Anacortes School District.

All required documentation requested below must accompany the form. All questions must be answered. If additional space is required, attach a separate sheet of paper.

Section I – Personal Information (please print or type)

Full Name _____
(Last) (First) (Middle)

Mailing Address _____
(Street) (City) (State) (Zip Code)

Home Telephone Number (_____) _____

Please list all former names you have used and the approximate dates of use. (If more than three, list on a separate sheet of paper).

_____ Date _____
Date _____
Date _____

Section II – Professional Fitness

If you answer “yes” to questions 1, 2, 3, and/or 4, give a complete explanation, including duties, circumstances, and supporting documentation on a separate sheet of paper.

- | Yes | No | |
|-----|-----|--|
| ___ | ___ | 1. Have you ever been dismissed, discharged or fired from any employment? |
| ___ | ___ | 2. Have you ever resigned from or otherwise left any employment while allegations of misconduct on your part were pending or under investigation? |
| ___ | ___ | 3. Have you ever been disciplined by a past or present employer because of allegations of misconduct? |
| ___ | ___ | 4. Are you currently the subject of any investigation or inquiry by an employer because of allegations of misconduct or harassment on your part or have you ever been found guilty of misconduct or harassment by an employer? |
| ___ | ___ | 5. Has your professional license ever been revoked? |
| ___ | ___ | 6. Have you ever had sanctions placed on your teaching certificate for any reason? |
| ___ | ___ | 7. Have you ever been denied a teaching certificate anywhere? |
| ___ | ___ | 8. Is disciplinary action currently pending anywhere against your certificate? |

Section III - Fitness

If you answer “yes” to questions 4 and or 5, attach copies of any court orders entered in the proceeding.

- | Yes | No | |
|-----|-----|---|
| ___ | ___ | 1. Are you able to perform the essential function of a certificated/classified position with or without reasonable accommodation? |
| ___ | ___ | 2. Do you currently use illegal drugs? |
| ___ | ___ | 3. Have you used illegal drugs in the last year? If your answer is “yes”, explain on a separate sheet of paper. |
| ___ | ___ | 4. Have you ever been found in any dependency or domestic relation matter to have sexually assaulted or exploited any minor? |
| ___ | ___ | 5. Have you ever been found in any dependency or domestic relation matter to have sexually assaulted or exploited any person? |

Section I V – Criminal History

If you answer “yes” to questions 1 and/or 2, please provide the following:

a) a detailed statement included what occurred, the nature of the offense, charge or warrant; b) the name and address of the arresting agency; c) the date of the arrest; d) the final disposition, if any; e) if a court was involved, the name and address of the court; f) the complete arrest report and judgement, and g) a complete driving abstract for five years if the arrest was driving related.

Yes No

___ ___ 1. Have you ever been arrested for any crime or violation of the law? (Note: If your case was dismissed or your record sealed, you must answer this question in the affirmative). You need not list **traffic** violations for which a fine or forfeiture of less than \$150 was imposed.

___ ___ 2. a. Do you currently have any outstanding criminal charges or warrants of arrest pending against you in Washington?

___ ___ b. Do you currently have any outstanding criminal charges or warrants of arrest pending against you in any other state, province, territory, and/or country?

___ ___ 3. Are you presently under investigation in any jurisdiction for possible criminal charges? **If your answer is “yes”, identify the agency and location (street address, city, state and phone number).**

A “yes” answer to questions 1, 2, and/or 3 above will not necessarily bar you from employment.

Declaration

I certify (or declare) under the penalty of perjury under the laws of the State of Washington that the foregoing and all information included in this form are true and correct.

If the information provided or answer(s) to any question(s) on this Applicant Disclosure form change prior to my being hired, I understand that I must immediately notify the Anacortes School District.

I understand I must answer this form truthfully and completely. Any falsification or deliberate misrepresentation in the completion of this application including omission of a material fact can be grounds for denial of employment or continued employment.

Signature

Date

City and State

To Be Completed After Conditional Employment Is Offered:

I certify under penalty of perjury under the laws of the State of Washington that as of this date ____/____/____, a date on or after which I have been offered conditional employment with the Anacortes School District, the foregoing remains true and correct. I further certify that I have been released from all contractual obligations with other school districts in or out of Washington State. I understand that any falsification or deliberate misrepresentation, including omission of a material fact or failure to complete any part of my application or this questionnaire can be grounds for denial of employment or continued employment with the hiring district.

Your signature must be witnessed by an employee of Anacortes School District.

Print Name: _____

Sign Name: _____

Witness, Print Name/Title: _____

Witness, Sign Name: _____

Date and Place: _____