



Valle Lindo School District
 1431 N. Central Ave.
 South El Monte, CA 91733 * (626) 580-0610

FOR PERSONNEL USE ONLY

**APPLICATION FOR
 CERTIFICATED EMPLOYMENT**

APPLICANT: PLEASE PRINT IN INK OR TYPE ALL INFORMATION REQUIRED, EVEN IF LISTED IN YOUR RESUME.
 (Applications are kept on file for six months. If elected for employment, the application becomes part of your permanent personnel file.)

POSITIONS FOR WHICH YOU ARE APPLYING (INDICATE ORDER OF PREFERENCE):			DATE AVAILABLE _____
<input type="checkbox"/> ELEMENTARY CLASSROOM	<input type="checkbox"/> MIDDLE SCHOOL CLASSROOM	<input type="checkbox"/> SPECIAL EDUCATION (Specify) _____	<input type="checkbox"/> OTHER (Specify) _____
ELEMENTARY GRADE PREFERENCE	1. _____ 2. _____ 3. _____	SECONDARY: SUBJECTS CREDENTIALIALED TO TEACH _____	
SECOND LANGUAGE ABILITY: _____ Speak <input type="checkbox"/> Fluently <input type="checkbox"/> Some <input type="checkbox"/> None Read/Write <input type="checkbox"/> Fluently <input type="checkbox"/> Some <input type="checkbox"/> None		ARE YOU INTERESTED IN SUBSTITUTE TEACHING? <input type="checkbox"/> YES <input type="checkbox"/> NO GRADE AREA PREFERENCE: _____	

PERSONAL INFORMATION

First Name	Middle Name	Former Name	Last Name
Mailing Address	City	State	Zip
Home Phone ()	Cell Phone ()	Social Security Number	

LICENSE / CREDENTIAL INFORMATION

TEACHING/ADMINISTRATIVE CREDENTIALS HELD: (Identify subjects/grades/areas authorized by credential.)

Type _____	Authorization _____	State of Issue _____	Expires _____
Type _____	Authorization _____	State of Issue _____	Expires _____
Type _____	Authorization _____	State of Issue _____	Expires _____

CALIFORNIA TEACHING/ADMINISTRATIVE CREDENTIAL APPLIED FOR:

Type _____	Authorization _____	Expires _____
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CALIFORNIA BASIC EDUCATIONAL SKILLS TEST (CBEST) PASSED YES NO Date Scheduled _____

EDUCATION

Include High School Information

Name of Institution	Location (City/State)	Dates Attended	Degrees Earned	Major	Sem. Units	Minor	Sem. Units

Number of semester units of graduate work* beyond BA or BS degree _____ Number beyond MA or MS _____
 (1 QUARTER UNIT = 2/3 SEMESTER UNIT)

*Graduate work is defined as any work given by a college or university acceptable toward meeting requirements for an advanced degree or credential and taken after the date the BA degree is received. Transcripts of all college and university work are required before a contract can be issued.

Scholastic Honors _____

Circle Scholastic Grade Average of undergraduate college work: A A- B B- C C- D D-

EXPERIENCE

List only experience applicable to position for which you are applying, the most recent first.

STUDENT TEACHING EXPERIENCE:

District	City/State	Number of Weeks	Dates	Grade/Subject	Master Teacher	Principal

TEACHING EXPERIENCE UNDER CONTRACT: (Do not list Substitute Teaching)

District	City/State	Dates From To	Length of Service	Grade/Subject	Immediate Supervisor	Reason for Leaving

TOTAL YEARS TEACHING EXPERIENCE UNDER CONTRACT _____
 EDUCATIONAL EXPERIENCE OTHER THAN CONTRACT TEACHING: (Include part-time and Substitute Teaching here)

District	City/State	Type of Work	Dates From To	Length of Service

EXPERIENCE OTHER THAN TEACHING:

Name of Firm	City/State	Type of Work	Dates From To	Length of Service

PROFESSIONAL REFERENCES

Give at least five references, including principals under whom you have recently taught. Please check (✓) the appropriate column if the reference has ever served as your immediate supervisor and/or a letter from that person is included in your papers.

Letter in File (✓)	Immed. Super. (✓)	Name	Position	Address	Phone

Where are your confidential papers (placement folder) on file? _____

NOTE: An experienced teacher must provide the school district with a current evaluation of teaching in the placement folder or by direct mail. Each applicant must make arrangements to have his/her confidential papers sent to the personnel office immediately. Confidential papers sent to us will only be used in the Valle Lindo School District.

PLEASE EXPLAIN ANSWERS BELOW. ANSWERS WILL NOT NECESSARILY DISQUALIFY YOU FROM CONSIDERATION, BUT MAY BE DISCUSSED WITH YOU BY A PERSONNEL ADMINISTRATOR. FALSIFICATION OF INFORMATION COULD RESULT IN TERMINATION.

- | | YES | NO |
|--|--------------------------|--------------------------|
| A. HAVE YOU EVER HAD A CREDENTIAL SUSPENDED OR REVOKED?
<i>If yes, please explain where and why.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. HAVE YOU BEEN DISMISSED OR ASKED TO RESIGN FROM A JOB?
<i>If yes, give name of employer and explain situation.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. HAVE YOU EVER LEFT A TEACHING POSITION PRIOR TO THE EXPIRATION OF A CONTRACTUAL AGREEMENT?
<i>If yes, please explain where and why.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. HAVE YOU EVER FAILED TO BE REELECTED IN A TEACHING POSITION?
<i>If yes, explain where this occurred and the circumstances.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. DO YOU HAVE ANY PHYSICAL OR OTHER LIMITATIONS WHICH MAY AFFECT JOB PERFORMANCE IN THE JOB FOR WHICH YOU ARE APPLYING?.....
<i>If yes, what can be done to accommodate your limitation.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. ARE YOU RELATED TO ANY PRESENT EMPLOYEE OF THIS DISTRICT?
<i>If yes, who?</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| G. HAVE YOU EVER BEEN EMPLOYED BY THIS DISTRICT?
<i>If yes, give location and date employed.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| H. ARE YOU CURRENTLY UNDER CONTRACT?
<i>If yes, give location and date of expiration.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| I. DO YOU OBJECT TO HAVING YOUR PRESENT EMPLOYER CONTACTED?
<i>If yes, please give reason.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| J. DO YOU OBJECT TO HAVING YOUR FORMER EMPLOYERS CONTACTED?.....
<i>If yes, please give reason.</i> | <input type="checkbox"/> | <input type="checkbox"/> |
| K. IF EMPLOYED, CAN YOU PROVIDE VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES?.....
<i>If no, please explain.</i> | <input type="checkbox"/> | <input type="checkbox"/> |

* REFERENCE EXPLANATIONS TO ABOVE QUESTIONS BY LETTER A, B, C, ETC. ADDITIONAL SHEETS MAY BE ATTACHED IF NEEDED.

L. HOW WERE YOU INFORMED OF THIS OPENING? _____

SPECIAL SKILLS/TRAINING

- | | | | | |
|--|--|---|------------------------------|------------------------------------|
| <input type="checkbox"/> TRAINED IN ASSERTIVE DISCIPLINE | <input type="checkbox"/> TRAINED IN CLINICAL TEACHING TECHNIQUES | <input type="checkbox"/> MUSIC | <input type="checkbox"/> ART | <input type="checkbox"/> COMPUTERS |
| | | <input type="checkbox"/> MULTICULTURAL TRAINING | | |
| <input type="checkbox"/> MUSICAL INSTRUMENT(S) _____ | | | | |
| <input type="checkbox"/> OTHER TRAINING _____ | | | | |

Underscore any of the following which you are able to direct or coach successfully: Debates, School Plays, Oratorical Contests, Clubs, Football, Basketball, Track, Tennis, Calisthenics, Playground Activities, Cross Country, Golf, Soccer, Swimming, Water Polo, Wrestling, Drill Team, Dance, Newspaper, Vocal Music, Instrumental Music, Aerobics.

What additional qualifications do you feel you possess for the position for which you have applied? (e.g. Youth leadership, articles or books published, honors or awards, travel, cocurricular activities or hobbies.) _____

ORIGINAL STATEMENT

(MUST BE COMPLETED BY EACH APPLICANT)

*Write a brief statement covering some noteworthy experience or activity
in which you have participated in the last few years.*

CERTIFICATION OF APPLICATION

Please read the following statements carefully before signing:

I certify that the statements I have made in this application are true. Further, I authorize the Valle Lindo School District to verify the foregoing and any other information which might assist the District in determining my qualifications for employment.

I hereby release the Valle Lindo School District, my former employers, law enforcement officers, or other individuals from any liability which may result from such investigation.

I understand and agree that any material misrepresentation or deliberate omission of pertinent information may be justification for refusal of or, if employed, termination from Valle Lindo School District.

Date: _____ Legal Signature: _____

AN AFFIRMATIVE ACTION EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

The Valle Lindo School District does not discriminate in its recruitment, hiring and employment practices.