EMPLOYMENT APPLICATION – CLASSIFIED

Dear Applicant:

Thank you for your interest in obtaining employment with the Darrington School District. Our application selection procedures are as follows:

- Complete the enclosed application form and affirmative action questionnaire.

- When your application file has been completed and returned to the District office, it will be placed in our active applicant pool. As positions for which you are qualified become available, submit a letter of application, stating your interest in that particular position. If you are selected for further consideration, you will be contacted.

- Interviews are scheduled through the Administration Office. Please do not contact principals regarding position openings and interviews.

- When the interview and selection process is complete, the recommended candidate will be offered the position and all other candidates will be notified of the decision.

- If a position within the Darrington School District is offered to you, you will be required, under Washington State law, to be fingerprinted for state and national background checks. **Cost for the background check must be paid by the applicant.**

Applications will be retained in the current file until November 1 following the date of receipt. After that date, renewal will be made annually for the ensuing one year upon request by the applicant.

Thank you for your application. Feel free to contact the administration office if you have any questions regarding application procedures.

*We reserve the right to modify the details of a position posting at any time.*
AFFIRMATIVE ACTION PROGRAM QUESTIONNAIRE

Your cooperation in completing this form is appreciated. Information derived from this sheet is for statistical purposes, to prevent discrimination and to help in the evaluation of our personnel procedures and policies in accordance with the District's Affirmative Action Program. **This information is voluntary and confidential and will not be filed with or made a part of your application or personnel file.**

Name _____________________________________________ Date ____________________

Position Applied for _____________________________________________________________

Other positions you are interested in _______________________________________________

Sex: ____ Male          ____ Female                        Age: ____ Under 40       ____ Over 40

Vietnam Veteran (Service between 1 Aug 1964 and 1 May 1975)  ____ Yes       ____ No

Disabled Veteran (recognized by the Veterans' Administration)  ____ Yes          ____ No

Disabled (any person who has a physical or mental impairment which substantially limits one or more of major life activities)  ____ Yes  ____ No

Please specify the disability ______________________________________________________

Racial/Ethnic Identification Group:

____ American Indian or Alaskan Native: A person having origins in any of the original peoples of North America and who maintains cultural identification through tribal affiliation or community recognition.

____ Asian or Pacific Islander: A person having origins in any of the original peoples of the Far West, Southeast Asia or the Pacific Islands. These areas include China, Japan, Korea, the Philippine Islands, and Samoa.

____ Black, not of Hispanic Origin: A person having origins in any of the Black racial groups of Africa.

____ Hispanic: A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.

____ White, not of Hispanic Origin: A person having origin in any of the original peoples of Europe, North Africa or the Middle East (or the Indian Subcontinent).

____ Mixed: A person to whom more than one of the above characteristics apply.

Please specify: _________________________________________________________________
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DISCLOSURE

1. Have you ever been convicted of any crime against persons? If yes, please explain. Use additional paper if necessary.

2. 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? If yes, please explain. Use additional paper if necessary.

3. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor? If yes, please explain. Use additional paper if necessary.

4. Have you ever been found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor? Use additional paper if necessary.

Failure to complete this DISCLOSURE will invalidate any application.

Signature of Applicant __________________________ Date ________________
EMPLOYMENT APPLICATION - CLASSIFIED

DARRINGTON SCHOOL DISTRICT NO. 330
P.O. Box 27, 1065 Fir Street, Darrington, WA 98241

Last Name                     First Name                     Middle Name            Social Security Number
(Print your last name as it appears on your Social Security Card.)

Present Address _______________________________________________________________
Street or P.O. Box                  City                    State/Zip           Telephone Number

Permanent Address _______________________________________________________________
Street or P.O. Box                  City                    State/Zip           Telephone Number

POSITION(S) APPLIED FOR (Designate in order of preference the category of position for which you are applying by writing the numeral 1, 2, and 3 beside the following:

_____ Custodial            ____ Grounds            ____ Food Service            ___ Instructional Assistant
_____ Secretary            ____ Transportation     ____ Substitute

EDUCATION

<table>
<thead>
<tr>
<th>Name of school and location</th>
<th>Degree</th>
<th>No. of Years</th>
<th>Yr Graduated</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School/GED</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>College/University</td>
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<tr>
<td>Business School</td>
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</tr>
<tr>
<td>Vocational School</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Non-credit, night school, distance learning courses, other education (List name of course, grade, year taken.):

____________________________________________________________________________ |
____________________________________________________________________________ |
____________________________________________________________________________ |

(Use other side if needed.)
SPECIAL SKILLS
List any other education, training, special skills, or certificates/licenses you posses:

_______________________________________________________________________________________________

_______________________________________________________________________________________________

List any machines or equipment you are qualified and experienced at operating:

_______________________________________________________________________________________________

PREVIOUS EMPLOYMENT
List the last 10 years’ work experience beginning with the most recent:

Company name ___________________________________________ Phone Number _______________
Address __________________________________________________
Name and Title of Supervisor _____________________________________________
Job Title and Description of work _____________________________________________
                                                                                       Years of employment _________________________

Company name ___________________________________________ Phone Number _______________
Address __________________________________________________
Name and Title of Supervisor _____________________________________________
Job Title and Description of work _____________________________________________
                                                                                       Years of Employment _________________________

Company name ___________________________________________ Phone Number _______________
Address __________________________________________________
Name and Title of Supervisor _____________________________________________
Job Title and Description of work _____________________________________________
                                                                                       Years of Employment _________________________
MILITARY SERVICE
Branch of Service_________________ Dates of Service_________________ Type of Discharge__________________
Service Occupation___________________________________________________________
____________________________________________________________________________________________

PERSONAL
Are you a U.S. citizen or have you applied for citizenship? [ ] YES   [ ] NO
Do you have any physical, mental, or sensory limitations or disabilities that may affect your ability to perform the type of work for which you are applying? [ ] YES   [ ] NO
If yes, explain__________________________________________________________________________________
Have you been convicted in a court of law for a crime or released from prison [ ] YES   [ ] NO
Note: A conviction record will not necessarily disqualify you from employment; however, you will be asked to disclose details.
Have you previously worked for the Darrington School District? If yes, under what name?_____________________________________________________________________________________

NOTE: Darrington 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 employee(s) has been designated to handle questions and complaints of alleged discrimination: Tracy Franke, Superintendent, Title IX and Civil Rights Coordinator, tfranke@dsd.k12.wa.us (360) 436-1323 and Cindy Christoferson, High School Principal, Special Education Director and Section 504 Compliance Coordinator, cchristoferson@dsd.k12.wa.us (360) 436-1140, PO Box 27 Darrington WA 98241.

REFERENCES
Name    Address    Phone    Official Position
__________________________________________
__________________________________________
GENERAL INFORMATION

- A personal interview is required before an applicant can be recommended for employment. The applicant will be contacted by the District Office to arrange a time for an interview.
- Any falsification or omission on this application for employment will be considered sufficient cause for dismissal.
- ONLY CANDIDATES WITH COMPLETE APPLICATION MATERIALS WILL BE CONSIDERED FOR THE POSITION AND NOTIFIED OF THE POSITION STATUS.
- Washington State law now requires that any person newly hired by a school district must be fingerprinted for a State and National background check. Employment is contingent upon clearance of the background check. Cost for the background check must be paid by the applicant.
- Do you have a current first aid card? ____YES _____NO If you do not have a current first aid card, the initial card is your responsibility at your own expense.

The foregoing is true and complete to the best of my knowledge. I acknowledge that failure to provide true and complete information can be, if I am hired, grounds for discipline, up to and including discharge.

Signature of Applicant __________________________________________ Date __________________

I hereby authorize the Darrington School District, at its discretion, to contact my previous employers, related references, and public entities, which may have information relative to my suitability for employment. I hereby release all of those employers, references, academic institutions, and the District from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the District.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials, employment references and background. I further understand that any false or misleading statements will be sufficient cause for rejection of my application if the District has not employed me and for immediate dismissal if the District has employed me. I also authorize the District to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having a legal and proper interest, and I hereby release the District from any and all liability for its providing this information.

I hereby acknowledge that I have read and understand the preceding statement.

Signature __________________________________________ Date __________________

Printed Name __________________________________________________________________________
Please respond to the following question. Return your response with your completed application.

WHY DO YOU ENJOY WORKING WITH CHILDREN/YOUNG ADULTS?