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MENDOCINO UNIFIED SCHOOL DISTRICT
P O Box 1154 44141 Little Lake Road Mendocino, CA 95460
(707) 937-5868 Fax: (707) 937-0714 Web: http://www.mendocinoused.org
APPLICATION FOR ADMINISTRATIVE EMPLOYMENT

Applicant's Name _____ Full
 (Last) (First) (M.I.)

Other Name(s) _____
 (Street) (City) (State) (ZIP)

Telephone Numbers: _____ email: _____

Present: () _____ Permanent: () _____ Work: () _____ Cell: () _____

My signature below authorizes the school to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and educational institutions, personal references, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and the reference source from any liability in connection with its release or use. This release includes the sources cited above and specific examples as follows: the local law enforcement agencies, information from the Central Criminal Records Exchange of either data on all criminal convictions or certification that no data on criminal convictions are maintained, information from the California or other State Department of Social Services Child Protective Services Unit and any locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me. Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application, and I understand that any omission or falsely answered statement made by me on this application, or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the school district.

Date _____ Signature of Applicant _____

MARK THE APPROPRIATE BOXES: INDICATING POSITION(S) DESIRED FOR WHICH YOU ARE CREDENTIALLED.

- New Application Administration Special Education
 Previous Application on File Classroom Teacher Resource Teacher
 Former Employee of the District Psychologist/Counselor Other: _____

Can you, after employment, submit verification List grade level(s) and/or subject area(s) you are credentialed to teach. of your legal right to work in the United States?
 Yes No

DISTRICT USE ONLY

I. EDUCATIONAL AND PROFESSIONAL TRAINING (List chronologically - most recent first.)

Dates of Attendance From... To...	Name of School or University	State	Field of Study	Type of Degree	Year of Graduation

NUMBER OF SEMESTER UNITS BEYOND BACHELOR'S DEGREE _____

II. ADMINISTRATIVE EXPERIENCE (List chronologically - most recent first.)

Dates Mo/Day/Yr	Name of School	School Division City/County	State	Position Held	Total Years	Full time	Part Tim	Contact Person/Telephone
Total:								

III. TEACHING EXPERIENCE (List chronologically - most recent first. DO NOT INCLUDE SUBSTITUTE TEACHING.)

Dates Mo/Day/Yr	Name of School	School Division City/County	Stae	Position Held Grade and/or Subjects Taught	Total Years	Full Tim	Par t Ti m	Contact Person/Telephone
Total:								

IV. WORK EXPERIENCE OTHER THAN TEACHING (List chronologically - most recent first. Attach a sheet if necessary.)

Dates of Employment	Employer	City/County	State	Contact/Supervisor	Personnel Use

V. OTHER RELEVANT EXPERIENCE (Include U.S. military service which would be relevant to this teaching position.)

VI. CERTIFICATION

A. If you have been issued a California Credential, please attach a photocopy...Copy attached? No Yes

CA. Credential or permit: Emergency Provisional Clear Multiple Subject Single Subject

Year of Expiration of California Credential _____

Subject(s)/Endorsements _____

BCLAD CLAD LDS BCC

B. If you have been issued a certificate/credential in another state, please submit a photocopy.

State _____ Expiration Date _____

Certification/Endorsements _____

State _____ Expiration Date _____

Certification/Endorsements _____

State _____ Expiration Date _____

Certification/Endorsements _____

Bilingual/Crosscultural Lang. Development Specialist

VII. GENERAL INFORMATION (additional space provided at the end)

Month, day, and year available for employment _____ Are you under contract No Yes

If yes, where _____

Present Position _____

If presently employed, why do you wish change?

If under contract, what type: Temporary Probationary Tenure Other

If under contract, have you checked and can you be released if you are offered another position? No Yes

If not under contract now, have you ever held a continuing contract in California? No Yes

If yes, cite school district(s) and date(s)

Referral Source: Advertisement/Posting employee Friend Other

(Explain) _____

Have you ever been refused tenure or a continuing contract? (if yes, explain on back.) No Yes

Have you ever been discharged or requested to resign from a position? (If yes, explain on back.) No Yes

Have you ever been convicted of a violation of law other than a minor traffic violation? No Yes

If yes, explain:

(A conviction will not necessarily disqualify an applicant from employment.)

Have you ever had a credential or certificate revoked or suspended? (If yes, explain on back.) No Yes

Have you been convicted of any offense involving the sexual molestation, physical or sexual abuse, or rape of a child? (If yes, explain on back.) No Yes

VIII. REFERENCES

It is the applicant's responsibility to have the following information provided to the School District in order to be considered for employment.

- A. The names of at least three reference sources must be provided, including current employer, if employed, or last employer if not currently employed.
- B. Applicants with work experience must provide at least three written recommendations from principals and/or superintendents from all contracted educational work experiences within the past five years. If experience was not within the past five years, provide references from last contracted experience. Attach any additional information needed to clarify or expand.

Name of Reference	Position/Relationship	Mailing Address	Phone
			()
			()
			()

IX. EXTRACURRICULAR ACTIVITIES Please list job related organizations, clubs, professional societies or other associations to which you belong. (You may omit those which indicate your race, religion, creed, color, national origin, ancestry, sex, or age.)

High School Experience	College Experience	Extra Curricular Activity	Other Experience

X. OTHER INFORMATION

Please list any languages other than English that you speak and your level of fluency. _____

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Please list any experience you have in working with children from a variety of educational needs, cultures, ethnic/ language groups, etc.

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If you have a physical condition or disability which may limit fulfilling the essential job functions of this position, please indicate accommodations that could be made to allow you to perform the job.

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In your own handwriting, provide any additional information that will afford an additional understanding of your qualifications to teaching in Mendocino Unified School District. Your goals, objectives, philosophy, and other background factors are of special interest.
