MENDOCINO UNIFIED SCHOOL DISTRICT P O Box 1154 - 44141 Little Lake Rd., Mendocino, CA 95460 (707) 937-5868 Fax: (707) 937-0714 APPLICATION FOR CERTIFICATED EMPLOYMENT

Applicant's Full Name					
Other	(Last)	(First)	(First)		
Address					
	(Street)	(City)	(State)	(ZIP)	
Telephone Numbers: Present: () Email:	Permanent: ()		Work: ()		

MENDOCINO UNIFIED SCHOOL DISTRICT IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER

The Mendocino Unified School District prohibits discrimination, intimidation, harassment (including sexual harassment) or bullying based on a person's actual or perceived age, ancestry, color, disability, ethnicity, gender, gender expression, gender identity, genetic information, immigration status, marital status, medical information, national origin, parental status, pregnancy status, race, religion, sex, sexual orientation, or association with a person or group with one or more of these actual or perceived characteristics. For questions or complaints, contact Equity Officer/Title IX Compliance Officer: Jason Morse, Superintendent, 44141 Little Lake Road, P.O. Box 1154, Mendocino, CA 95460, (707) 937-5868, <u>JMorse@mcn.org</u>.

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

- □ New Application Previous Application on File
- □ Administration

Special Education

- □ Former Employee of the District
- □ Classroom Teacher □ Psychologist/Counselor Other:
- Resource Teacher

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 D No

I. CERTIFICATION

A. If you have been issued a California Cred	ential, please a	attach a photo	copyCopy attache	ed? No □ Yes □
CA. Credential or permit: Emergency Year of Expiration Subject(s)/Authorization	on of California			Single Subject □
BCLAD 🗆	CLAD 🗆	LDS 🗆	BCC 🗆	
B. If you have been issued a certifica State	ate/credential in Expira		· •	photocopy.
Certification/Endorsements				
State	Exp	iration Date		
Certification/Endorsements				
State	Expi	ration Date		
Certification/Endorsements	-			
Bilingual/Crosscultu	iral 🗆 Lang. I	Development :	specialist 🛛	

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I. EDUCATIONAL AND PROFESSIONAL TRAINING (List chronologically - most recent first.) Official transcripts are required to final salary determination. One quarter unit = 2/3 semester units.

Name of School or University	Address	State	Field of Study	Type of Degree

NUMBER OF SEMESTER UNITS BEYOND BACHELOR'S DEGREE

II. TEACHING EXPERIENCE (List chronologically - most recent first) Include student teaching, but not substitute teaching.

Dates Mo/Day/Yr	Name of School	School Division City/County	State	Position Held Grade and/or Subjects Taught	Total Years	Full Time	Part Time	Contact Person/Telephone
					Total:			

III. OTHER WORK EXPERIENCE (List chronologically - most recent first). Include relevant military service.

Dates of Employment Employer	City/County	State	Contact/Supervisor	Personnel Use
Dates of Employment Employer	City/County	State	Contact/Supervisor	0.50

IV. REFERENCES

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

List five (5) references including three (3) who have observed your work professionally, including you present/most recent supervisor. May we contact your present supervisor for a reference? No D Yes D

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

V. SPECIAL INTERESTS, ACTIVITIES AND PUBLICIATION (You may omit those which indicate your race, religion, creed, color, national origin, ancestry, sex, or age.)

Professional Organizations:
Awards/Publications:
Athletics you are willing and capable of supervising
Languages (other than English) that you speak
VI. GENERAL INFORMATION
Month, day, and year available for employment
Are you currently under contract No D Yes D
If yes, where
Present Position
If presently employed, why do you wish change?
If under contract, what type: Temporary D Probationary D Tenure D Other D
If under contract, have you checked and can you be released if you are offered another position? No D Yes D
If not under contract now, have you ever held a continuing contract in California? No I Yes I
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? (f yes, explain on back.) No □ Yes □
Have you ever been discharged or requested to resign from a position? (If yes, explain on back.) No D Yes D
Does the CCTC have any open or pending investigations or administrative reviews against you? No I Yes I
Has any former employer reported allegations of misconduct against you to the CCTC? No I Yes I
Have you ever been convicted of a violation of law other than a minor traffic violation? No Ves
If yes, explain in an attached letter. (A conviction will not necessarily disqualify an applicant from employment.) Have you ever had a credential or certificate revoked or suspended?
Have you ever had a credential or certificate revoked or suspended? No □ Yes □ If yes, explain in an attached letter
Have you been convicted of any offense involving the sexual molestation, physical or sexual abuse,
or rape of a child? (If yes, explain in an attached letter).
My signature below authorizes the school to conduct a thorough 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 misinformation 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 immediate discharge should I become employed with the school district.
עופטוומוצר פווטעוע דשבטוווד בווואוטצבע אונוד גורב פטוטטו עופגווטג.

Signature of Applicant_____

Date____