

PLEASE COMPLETE THE AREAS RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING:

Instructional Assistant

Working with children (elementary) _____ years exp.
 Working with children (secondary) _____ years
 Typing (electric) _____ w.p.m. _____ years
 Word processor experience _____ w.p.m. _____ years
 Library experience _____ years
 Current First Aid Card? _____ yes _____ no
 Experience as an aide for children with
 Exceptional needs _____ yes _____ no

Bookkeeper/Accounts Payable

Typing (electric) _____ w.p.m. _____ years
 Word Processor experience _____ w.p.m. _____ years
 Calculator (10 key) experience _____ years
 Payroll experience _____ years
 Record/bookkeeping experience _____ years
 Computer operation experience _____ years
 Type of computer? _____
 General bookkeeping experience? _____ years

Food Service

Valid Food Handler's Permit _____ yes _____ no
 Expiration date: _____
 Basic knowledge of nutrition? _____ yes _____ no
 Quantity cooking experience? _____ years
 Operating commercial-size equipment? _____ Years
 Dishwasher _____ yes _____ no _____ years
 List school food service experience on back page of
 Application, including baking, cooking, etc.

Secretary

Dictaphone/transcription experience _____ years
 Word processor _____ w.p.m. _____ years
 Computer operation experience _____ years
 General office machines experience _____ years
 Record-keeping/filing _____ years
 Receptionist/telephone experience _____ years
 Supervisory experience _____ years
 Current first aid card? _____ yes _____ no
 Computer operation for scheduling
 student classes _____ years
 Working with student records and
 transcripts _____ years

LIST YEARS AND TOTAL HOURS EXPERIENCE

<u>Maintenance & Operations</u>	<u>Years</u>	<u>Total Hours</u>
Carpenter	_____	_____
Custodian	_____	_____
Delivery	_____	_____
Electrical/Boilers	_____	_____
General Maintenance (include. General plumbing)	_____	_____
Grounds Maintenance	_____	_____
Painter	_____	_____
Warehousing	_____	_____
Bus Body/Fender	_____	_____
Bus Mechanic	_____	_____
Bus Service	_____	_____
Trainer - Bus Driver/First Aid	_____	_____
Electronics Repair	_____	_____

List specific power equipment you are skilled in operating in relation to this position:

Note: Commercial motor vehicle operators (bus drivers/M&O people who drive dump trucks) must provide at least 10 (ten) years prior employment history.

Bus Drivers

Valid Washington Driver's License _____ yes _____ no
 Current Comb. Or Intermed. Endorse. _____ yes _____ no
 School Bus Driver's Certificate _____ yes _____ no
 Inservice Training Records Current
 and/or available _____ yes _____ no
 Location: _____
 Bus Driving Experience:

Date: _____

Years: _____

Hours: _____

Have you been cited for any moving violation in the last three years? _____ yes _____ no

If yes, what type of violation?

What action was taken?

Note: In addition to responding to those areas which apply to this job opening, it is your responsibility to identify any additional specific skills or experiences which will help to qualify you for this position. Use the back page of this application form if necessary for additional comments stating your reasons for feeling you are qualified for this position.

PREVIOUS WORK EXPERIENCE (List current and former employers beginning with the most recent):

EMPLOYER	SUPERVISOR	DUTIES	FROM MO./YR.	TO MO./YR.
Name:	Name:			
Address:	Tel. #: ()			
City/State/Zip:	Beginning Salary _____ Ending Salary _____			
Name:	Name:			
Address:	Tel. #: ()			
City/State/Zip:	Beginning Salary _____ Ending Salary _____			
Address:	Tel. #: ()			
City/State/Zip:	Beginning Salary _____ Ending Salary _____			

PERSONAL REFERENCES (Other than relatives and former employers):

Name: _____

Address: _____

Phone: () _____

Name: _____

Address: _____

Phone: () _____

Name: _____

Address: _____

Phone: () _____

Notice to Applicant: Only candidates invited for an interview will be notified. Please feel free to call the supervisor regarding the status of your application. Candidates shall be required to demonstrate competency in basic skills (e.g. math, language) for teaching assistant positions.

I hereby certify that all information I have provided in this application is true and correct. I give my permission for the District to make any investigation of my personal or employment history and authorize any former employer, person, firm or corporation to give the District any information they may have regarding me. In consideration of the School District's review of this application I release the District, its employees and agents, and all providers of information from any liability as a result of furnishing and receiving this information. I also agree that if I have provided false or misleading statements, the District may, at its sole discretion, terminate my employment contract. References and personal information which become part of this application will be regarded as confidential and shall not be revealed.

Applicant's Signature

Date

TO: All Employees
FROM: Rick Winters, Superintendent
DATE: September 1, 2005
RE: Drug-Free Workplace Act

NOTICE TO EMPLOYEES – DRUG AND ALCOHOL POLICY

You are hereby notified that it is a violation of the policy of the St. John and Endicott School Districts for any employee to unlawfully manufacture, distribute, dispense, possess, use or be under the influence of any narcotic drug, hallucinogenic drug, amphetamine, barbiturate, marijuana or any other controlled substance as defined in Schedules I through V of Section 202 of the Controlled Substances Act (21 U.S.C. 812) and as further defined by regulation at 21 CVR 1300.11 through 1300.15, before, during or after school hours on school property or in any other School District location as defined below.

“School District location” means in any school building and on any school premises; in any school-owned vehicle or in any other school-approved vehicle used to transport students or staff to and from school or school activities; off school property during any school-sponsored or school approved activity, event or function, such as a field trip or athletic event; or, during any period of time such employee is supervising students on behalf of the School District or otherwise engaged in school District business.

You are further notified that if you are engaged either directly or indirectly in work on a Federal grant, it is a condition of your continued employment under any such Federal grant that you abide by the terms of the School District’s policy on drugs, and will notify your supervisor, in writing, of your conviction of any criminal drug statute for a violation occurring in any of the places listed above on which work on a School District Federal grant is performed no later than five (5) days after such condition.

Any employee who violates the terms of this policy shall be subject to appropriate disciplinary action up to, and including, discharge. The employee may, under appropriate circumstances at the discretion of the District, be required to satisfactorily participate in a drug or alcohol rehabilitation program.

St. John –Endicott Cooperative School Districts

APPLICANT DISCLOSURE FORM PURSUANT TO CHAPTER 486, LAWS OF 1987

Please Note: A background check with the Washington state Patrol will be conducted on all certificated and all unsupervised classified employees and volunteers, and may be initiated on any other classified employees and volunteers.

Answer YES and NO to each listed item. If the answer is YES to any item, explain in the area provided, indicating the charge or finding, the date and the court(s) involved.

1. Have you ever been convicted of any crimes against persons as defined in section 1 of Chapter 486, Laws of 1987, and listed as follows: Aggravated murder, first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree rape; first, second, or third degree statutory rape; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment?

No Yes

If yes, explain _____

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?

No Yes

If yes, explain _____

3. Have you ever been found by the 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?

No Yes

If yes, explain _____

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?

No Yes

If yes, explain _____

Pursuant to RCW 9A.72.085 I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant Signature _____ Date _____

Witness (with knowledge of applicant) _____

Witness Address and Phone Number _____

St. John-Endicott Cooperative School Districts
Certificated Pre-Employment Information

⇒ Confidential ⇐

Failure to provide the information requested below **will not** jeopardize or adversely affect the consideration you receive for employment. However, your answers will help ensure that our affirmative action program results in fair representation of employment and assist us in meeting requirements for periodic reporting of our work force composition. This form will be separated from your application before any evaluation of candidates is undertaken.

Sex: Male Female

Date of Birth: _____

Race/Ethnic Origin:

_____ American Indian or Alaska Native _____ Hispanic
_____ Asian or Pacific Island _____ White
_____ Black _____ Other _____

Race/Ethnic Origin Definitions:

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 East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands.

Black: 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/Caucasian: A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Disabilities: "Disabled individual" means any person who (1) has a physical or mental impairment which substantially limits one or more of such person's major life activities, (2) has a record of such impairment, (3) is regarded as having such an impairment, or (4) has a known relationship or association with a disabled person.

I am disabled as defined: _____ Yes _____ No

Recruitment Source: Please indicate the publication or other source where you obtained information regarding this position notice so we can determine the effectiveness of various recruitment efforts:

