

ST JOHN-ENDICOTT COOPERATIVE SCHOOL DISTRICTS
Coaching Application

Name _____

City/State/Zip _____

Home Phone: _____ Work Phone _____

Current Employment _____

<u>School District</u>	<u>Teaching Position</u>	<u>Grade Level</u>
_____	_____	_____

PLAYING EXPERIENCE: (Related to desired coaching position)

COACHING REFERENCES: (Use extra sheet if required)

WORK REFERENCES:

<u>Name</u>	<u>Position</u>	<u>School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

TEACHING ENDORSEMENTS (Subject Areas/Grade Level(s):

PHILOSOPHY: (Explain your philosophy as it applies to these areas.)

Winning _____

Sportsmanship _____

Discipline _____

Safety _____

JOB EXPECTATIONS (Expectations other than salary prerequisite to accepting this position)

Current First Aid Card? No Yes Expiration Date _____

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:

