

Delano Union School District Certificated Employment Application

1405 – 12th Avenue
Delano, California 93215

Received:
_____ Initial
_____ Date

Please Indicate Position Applying For:

Substitute Teacher

Date _____

Grade Level Preference _____

Last Name _____ First Name _____ Middle Name _____

Present Address

Street _____ City _____ State _____ Zip _____

Permanent Address

Street _____ City _____ State _____ Zip _____

Telephone

Home _____ Cell _____ Work _____

California Credentials Now Held Type	Subject/Category	Expires
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Name of California Credential Applied for: _____ Date of Application _____

Please check box if you have **passed** exam: CBEST (Please attach copy of passing CBEST score card)

Education:

	Name of college or University	Location	Subject Major/Minor	Degree	Date
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

Additional Information

If you have qualifications which especially characterize your ability to work with culturally different and/or minority groups and multi-ethnic programs, please attach a brief explanation to this application.

What languages do you read, write, or speak other than English: _____

Has your credential ever been suspended or revoked? Yes No

Have you ever been non-reelected from another district? Yes No

Have you ever left a teaching position prior to the expiration of a contract? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

If you answered "Yes" to any of the above, please attach an explanation of the circumstances.

Please provide at least three references who will verify the applicants' education and experience.

NAME	TITLE	ADDRESS	PHONE

List subjects/extra-curricular activities you are qualified for and/or willing to direct or supervise.

EMPLOYMENT HISTORY (Start with your present job. Include Military service. Please attach a sheet if more space is needed.)

1. Employer _____ Address _____
 Phone _____ Job Title _____ Supervisor _____
 Worked Performed _____
 Dates Employed: From _____ To _____
 Reason for Leaving: _____

2. Employer _____ Address _____
 Phone _____ Job Title _____ Supervisor _____
 Dates Employed From _____ To _____
 Reason for Leaving: _____

STUDENT TEACHING EXPERIENCE

DISTRICT	CITY/STATE	# YEARS	DATES	GRADES/SUBJECTS	PRINCIPAL/ADMINISTRATOR

TEACHING EXPERIENCE PLEASE TOTAL FULL-CONTRACTS ONLY (AT LEAST 75% OF THE SCHOOL YEAR) POSITIONS.

DISTRICT	CITY/STATE	# YEARS	DATES	GRADES/SUBJECTS	PRINCIPAL/ADMINISTRATOR

OTHER TEACHING-RELATED EXPERIENCE Please list any substituting, workshop presentations, etc...

DISTRICT	CITY/STATE	# YEARS	DATES	GRADES/SUBJECTS	PRINCIPAL/ADMINISTRATOR

I hereby certify that the statements above are true and complete to the best of my knowledge and belief. I understand that any statements made on this application may be cause for non-employment or dismissal if employed. I hereby authorize any investigation to obtain information required by this application and waive the right to hold liable those persons whose names I have listed as references. I understand that acceptance of this position in the Delano Union School District indicates a willingness to accept assignment where needed. I also understand that before my contract for teaching becomes effective or compensation is possible, a valid California credential, or an affidavit indicating that a California teaching credential has been applied for, must be presented at the District Personnel Office.

Signature of Applicant _____ Date _____