

COACHING APPLICATION

FOCUSED ON LEARNING AND LINKING LEARNING TO LIFE

To be considered for any classified position with the **Tonasket School District** applicants must submit the following:

1. **Coaching Application** - Complete a district application.
2. **WA State Sexual Misconduct Disclosure Release** - List all the school districts with whom you have worked. Complete a disclosure form for *each* district and return with your application packet.
3. **Letter of Interest** - Indicate for which position you are applying and your participation in other specialty areas.
4. **Resume**
6. **Letters of Recommendation** - Include three professional letters of recommendation, from previous employers that describe your work ethic and character reference.

Questions regarding any deviation from these guidelines should be directed to:
Tonasket School District Office, 35 DO Hwy 20 East, Tonasket, WA 98855.
Phone: 509-486-2126.

THE TONASKET SCHOOL DISTRICT IS
AN EQUAL EMPLOYMENT OPPORTUNITY/DIVERSITY EMPLOYER

Tonasket School District

APPLICATION FOR CLASSIFIED EMPLOYMENT AN EQUAL EMPLOYMENT OPPORTUNITY/DIVERSITY EMPLOYER

Tonasket School District
35 DO Hwy 20 East
Tonasket, WA 98855
509-486-2126
Fax: 509-486-1263

THE TONASKET SCHOOL DISTRICT IS A TOBACCO FREE,
DRUG AND ALCOHOL FREE EDUCATIONAL SYSTEM

CLASSIFIED APPLICATION

PLEASE TYPE OR PRINT

PERSONAL INFORMATION

Full Name

Last

First

Middle

Date

Mailing Address

Street

City

State

Zip

Telephone

Person through whom you may be reached

Telephone

Present position or employment status

Telephone

By District Policy and State Law you are required to disclose whether you have ever been:

1. Convicted of any crimes against persons as listed: aggravated murder; 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 SPECIFY

2. 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 SPECIFY

3. Found by a 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 SPECIFY

4. Found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor?

NO YES SPECIFY

5. In the last seven years, released from prison or convicted of any offense that involved drugs, embezzlement, or fraud?

NO YES SPECIFY

A fingerprint check will be **required prior to employment**, and a background check by the Washington State Patrol and FBI will be completed.

SIGNATURE RELEASE

All of the information I have provided in this application is true, correct, and complete. I authorize Tonasket School District #404 to inquire with former employers or references and obtain any and all information regarding my job related background. I release and waive Tonasket School District #404, my former employer(s), and all references from any and all liability in obtaining or disclosing such information. I agree that information provided by any individual shall be confidential and I shall not have access to such information. I agree that if I have provided false or incomplete statements, the District may, at its sole discretion, without notice or due process procedures, terminate my employment contract. If such action is taken by the District, the contract shall be deemed void from its inception.

Signature of Applicant

Date

JOB INTEREST/SKILLS

POSITION APPLYING FOR:

Date you could begin working:

Typing Speed:

Summarize any computer skills and any other special skills or qualifications:

EDUCATION and TRAINING

School	Name and Location	Course of Study	Dates Attended Mo/Yr - Mo/Yr	Grade Average	Grade Completed	Degree, Diploma, Certificate Received
High School						
College						
College						
Other						
Other						

REFERENCES

Name	Relationship	Home Phone	Work Phone

EMPLOYMENT HISTORY (List most recent first)

Name of Employer _____
Address _____
Supervisor and Title _____ Your Title _____
Dates Employed _____ Employer's Phone Number _____
Work Performed _____
Reason for Leaving _____

Name of Employer _____
Address _____
Supervisor and Title _____ Your Title _____
Dates Employed _____ Employer's Phone Number _____
Work Performed _____
Reason for Leaving _____

Name of Employer _____
Address _____
Supervisor and Title _____ Your Title _____
Dates Employed _____ Employer's Phone Number _____
Work Performed _____
Reason for Leaving _____

AFFIRMATIVE ACTION INFORMATION

In order to maintain the Tonasket School District's Affirmative Action Plan, the following information is needed. This information will be confidential.

ETHNIC AND RACE DESIGNATION Please answer the questions below.

QUESTION 1. A. Hispanic/Latino (Y) **QUESTION 1. B.** Not Hispanic /Latino (N)

Hispanic/Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin,

QUESTION 2.

- (I) American Indian or Alaska Native (P) Native Hawaiian or Other Pacific Islander
- (A) Asian (W) White
- (B) Black or African American

American Indian or Alaska Native (I) - A person having origins in any of the original peoples of North and South American

Asian (A) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent,

Black (B) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (P) - A person having origins in any of the original peoples of Hawaii, Guam,

White (W) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

DISABILITIES

Do you consider yourself to have a disability? (Definition of "disability" for affirmative action includes persons with physical, sensory, or mental impairments that would impede obtaining and maintaining permanent employment and promotional opportunities. The impairments must be significant and permanent.)

Yes No If yes, explain _____

VETERAN

Are you a Vietnam Era Veteran (served actively in the armed forces between 8/5/64 and 5/7/76)?

Yes No

Do you consider yourself to be a Disabled Veteran?

Yes No

Definition of a Disabled Vetetan:

"Person who is materially disabled (handicapped as defined above) and who is a veteran of the armed services."