

LIND-RITZVILLE COOPERATIVE SCHOOLS

**206 W 3rd St – PO Box 340
Lind, WA 99341
(509) 677-3481**

**209 E Wellsandt Ave
Ritzville, WA 99169
(509) 659-1660**

APPLICATION FOR CERTIFICATED EMPLOYMENT (Substitute Teacher)
An Equal Opportunity Employer

Full Name _____
Last First Middle

Other Name(s) under which records may be listed (optional) _____

Present Address _____ Telephone _____

Permanent Address _____ Telephone _____

Current Employment Status _____

Position Applying for _____

- 1. All candidates must provide the District with: Completed Application and Resume.

Total number of years of teaching experience: Public _____ Private _____

Was all full-time teaching under contract? Yes No

If no, then explain in detail below:

Substitute _____

Part-time _____

Other _____

ACADEMIC INFORMATION

Schools Attended (High School/College)	Location	Date of Graduation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PROFESSIONAL INFORMATION (list below teaching, administrative and special certificates)

EXPERIENCE(S) (include all teaching and military experience)

Dates		Firm or Employer	Position
From:	To:		(mark part-time positions with *)

REFERENCES (give three or more references including Principals and Teachers under whom you have worked who have first-hand knowledge about you)

Name	Full Address and Telephone Number	Official Title

PERSONAL INFORMATION:

Date Available to begin work: _____

Any health condition which might affect your assignment? _____

Are you a U.S. Citizen or otherwise lawfully employable in the United States? _____

Can you provide proof of employability, if requested? _____

Name, relationship and position of relatives now working for the Lind or Ritzville School Districts:

Have you within the past seven years been released from prison or been convicted of any offense that involved drugs, assault, rape, child abuse, child molestation, extortion, blackmail, coercion, embezzlement, fraud, stealing or robbery? Yes No

If yes, explain the nature of the crime, place and date _____

I hereby authorize Lind-Ritzville Cooperative Schools to inquire as to my record with any or all of my former employers or references with no liability arising there from. I hereby guarantee the correctness of the above statements. The making of any false statement will be sufficient cause for dismissal.

_____ Signature

_____ Date

The Lind-Ritzville Cooperative complies with all state and federal rules and regulations and does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression, gender identity, disability, or the use of trained dog guide or service animal, and provides equal access to the Boy Scouts of America and other designated youth groups. Inquiries regarding compliance and/or grievance procedures may be directed to Lind-Ritzville Cooperative Schools Title IX RCW 28A.640 Officer. Matthew Ellis. 209 E Wellsandt Ave.. Ritzville. WA 99169 or 509-659-1660.