

Cabrillo Unified School District
498 Kelly Avenue, Half Moon Bay, CA 94019
(650) 712-7124 or (650) 712-7114

CERTIFICATED EMPLOYMENT APPLICATION

Social Security No. _____ Year for which you are applying _____

| | | | |
|------------------------|------------|-------|------------|
| _____ | _____ | _____ | _____ |
| Last Name | First Name | M.I. | Home Phone |
| Mailing Address _____ | | | |
| City, State, Zip _____ | | | |

FOR WHAT POSITION(S) DO YOU WISH TO APPLY? Regular Substitute

Check Preferred Level: ___ Grades K-3; ___ Grades 4-5; ___ Grades 6-8; ___ Grades 9-12

For Grades 6-12, what subjects are you credentialed to teach? _____

What cocurricular activities can you lead? _____

CERTIFICATION

1. CALIFORNIA CREDENTIALS HELD (copy of each listed below is attached)

2. IF YOU DO NOT HOLD A CALIFORNIA TEACHING CREDENTIAL

What credential are you working toward: _____

Date of anticipated completion of requirements: _____

Have you applied to the Commission on Teacher Credentialing for a credential? Yes No

If yes, type of credential: _____

Through: County Office of Education College Directly to State Department

MISCELLANEOUS QUESTIONS

Has your credential ever been suspended or revoked: Yes No

Have you ever been dismissed or asked to resign from any teaching position? Yes No
(If yes, attach explanation on separate page.)

Have you ever been convicted of a felony or a misdemeanor or do you currently have a felony or misdemeanor offense pending? Yes No
(Convictions include a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or a jury.)

| ACADEMIC PREPARATION | Subject | Semester Units |
|-----------------------------|---------|----------------|
| Undergraduate Major | | |
| Undergraduate Minor | | |
| Graduate Major | | |
| Graduate Minor | | |
| Degrees You Now Hold | Date | Institution |
| | | |
| | | |

| TEACHING EXPERIENCE (List last position first.) | | | | | |
|---|---------|---------------|--------|----------|------------------|
| (Indicate type of teaching experience: Regular (Reg), Substitute (Sub), Student Teaching (Stu). | | | | | |
| Type | From/To | Subject/Grade | School | District | District Address |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| REFERENCES | | |
|--|-------------------|-------|
| List four persons who have a professional knowledge of your training and experience. | | |
| Name | Official Position | Phone |
| | | |
| | | |
| | | |
| | | |

NOTE: Pursuant to the Immigrant Reform and Control Act of 1986, I understand that an offer of employment made to me will be conditioned on my ability to provide evidence of my legal right to work in the United States.

CERTIFICATION OF APPLICANT:

"I hereby certify that all statements made in this application are true and correct and to the best of my knowledge, and authorize investigation of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application."

Signature of Applicant: _____ Date: _____

The Cabrillo Unified School District is an Equal Opportunity employer. The District does not discriminate in educational programs and activities or in the employment of personnel on the basis of sex, race, national origin, color, religion, age or physical ability. Disabled candidates are encouraged to request reasonable accommodation.