



FACULTY / CERTIFICATED STAFF APPLICATION

Position Desired/Preference: _____

Preference: 1. _____ 2. _____ 3. _____

Fluent in American Sign Language (ASL): Yes No In addition to English, I am fluent in: _____

PERSONAL INFORMATION

Last Name		First Name		Middle Initial	
Mailing Address			City		State Zip
Email				Fax #	
Home Phone ()	Work Phone ()	Cell Phone ()		Video Phone # ()	

EDUCATION

COLLEGE/UNIVERSITY	FROM	TO	# OF UNITS		MAJOR	MINOR
			Semester	Quarter		

CALIFORNIA CREDENTIALS HELD

TYPE

EXPIRATION

OUT-OF-STATE CREDENTIALS HELD

TYPE

EXPIRATION

List additional credentials on separate sheet and attach with your application.

STUDENT TEACHING EXPERIENCE (IF APPLICABLE)

DISTRICT	SCHOOL	FROM	TO	GRADE	SUBJECT	MASTER TEACHER

NOTE: Transcripts showing student teaching & grade must be attached (if applicant has completed student teaching).

PART OR FULL-TIME EXPERIENCE
(include substitute teaching / coaching experience, if applicable)

From (M/D/Y)	To (M/D/Y)	Job Title/Classification <i>(Range or Level, if applicable)</i>
Hours per week	Total Worked (Yrs/Mos)	Company/State Agency Name
Supervisor/Phone Number		Address
Duties Performed		
Reason for Leaving		

From (M/D/Y)	To (M/D/Y)	Job Title/Classification <i>(Include Range or Level, if applicable)</i>
Hours per week	Total Worked (Yrs/Mos)	Company/State Agency Name
Supervisor/Phone Number		Address
Duties Performed		
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From (M/D/Y)	To (M/D/Y)	Job Title/Classification <i>(Include Range or Level, if applicable)</i>
Hours per week	Total Worked (Yrs/Mos)	Company/State Agency Name
Supervisor/Phone Number		Address
Duties Performed		
Reason for Leaving		

APPLICATION

No interviews maybe conducted without a submitted application.

- All information on the application must be completed accurately and be verifiable.
- Applications will be eligible for consideration only after all supporting materials have been received and processed.
- It may not be possible to acknowledge receipt of applications.

Please submit the following documents with your application.

- Copy of current credentials held
- Resume
- Official Transcripts
- Three Professional References

CREDENTIALS

In order to be considered for employment, eligibility for the appropriate California Teaching Credential is required, including evidence of NCLB compliance, if applicable.

INTERVIEW

An interview is part of the selection process. Applicants are considered based on a completed application, transcripts, and references. Interviews will be scheduled for candidates as dictated by department. Candidates will be contacted to arrange for appointments.

Email attachments (or mail) completed application materials to: Dr. Robin L. Zane

- **Email:** rlzane@dcn-cde.ca.gov
- **Mail:** Diagnostic Center, Northern CA, 39100 Gallaudet Drive, Fremont, CA 94538

Please Note: Failure to complete all parts of the application may prevent your application from receiving consideration for vacancies

CERTIFICATION OF APPLICATION

Answers will not necessarily disqualify you from consideration:

- A. Have you ever been convicted by any court of an offense? Yes No
 The following need not be reported:
- a. Minor traffic violations for which the fine was \$50 or less
 - b. Any offenses which were finally settled in a juvenile court or under a welfare youth offender law
 - c. Any incident that has been sealed under welfare and institutions code section 781 or penal code section 1203.45
 - d. Any conviction specified in health and safety code section 11261.5. This section pertains to various marijuana offenses
- B. Has your driver’s license ever been suspended or revoked? Yes No
If your answer to (a) or (b) is yes, list all offenses in item #5 giving date, location, nature, and disposition for each and attach the statement to this form
- C. Do you possess a valid California driver’s license? Yes No
 If yes, enter your driver’s license number _____

FOR ANY “YES” ANSWERS TO THE ABOVE QUESTIONS, PLEASE ATTACH A LETTER OF EXPLANATION.

I certify under penalty of perjury that the information I have entered on this application is true and complete to the best of my knowledge. I further understand that any false, incomplete, or incorrect statements may result in my disqualification from the interview process or dismissal from employment with the State of California. I authorize the employers and educational institutions identified on this application to release any information they may have concerning my employment or education to the State of California.

SIGNATURE: _____ DATE: _____

CALIFORNIA STATE GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER: The law prohibits discrimination on the basis of race, color, creed, national origin, ancestry, sex, marital status, disability, religious or political affiliation, age or sexual orientation.