

SOUTH PASADENA UNIFIED SCHOOL DISTRICT
CERTIFICATED EMPLOYMENT APPLICATION

RETURN TO: Personnel Office (626) 441-5810 ext. 1130
 South Pasadena Unified School District Hours: 8:00 a.m. - 4:30 p.m.
 1020 El Centro St. Monday - Friday
 South Pasadena CA 91030

For Office Use Only

AN EQUAL OPPORTUNITY - AFFIRMATIVE ACTION EMPLOYER

Applicants will be required to submit proof of U.S. Citizenship or legal U.S. residence and identity if hired. Certificated employees will be required to furnish this office with proof of a physical examination at employee's expense. All employees must have a T.B. test and sign a loyalty oath.

In completing this application, please be reminded that the law protects the rights for equal employment opportunity regardless of race, creed, color, sex, age, physical handicap, or national origin; that employment acceptance or rejection shall be based on job related qualifications. Incomplete application may disqualify applicant.

TYPE, or PRINT using DARK INK ONLY. All applications must be signed.

1. Position Applying for: _____ 4. Phone No. (Home) _____
2. Name: (Print) _____ 5. Phone No. (Other) _____
 First Initial Last Name
3. Address: _____ 6. Social Security No.* _____
 Street City State Zip Code

POST SECONDARY EDUCATION 7. Names and locations of colleges attended	Dates Attended		Units		MAJOR	Degree or Certificate	
	From	To	Sem.	Qtr.		Type	Date

8. Awards Honors. Scholarships, Etc. which you feel are relevant to this position.
9. What languages besides English can you speak or write fluently?

10. Please list job-related organizations. clubs. professional societies or other associations to which you belong - you may omit those which indicate your race religious creed color national origin. ancestry, sex. or age.
- _____
- _____
- _____
- _____

11. Describe any job related volunteer experience you have had. Include date and location.
- _____
- _____
- _____
- _____
- _____

* Not required

Initial
First
Last Name
Print Your Name Here:

12. Do you have any physical condition or handicap which may limit your ability to perform the job applied for? If yes, what can be done to accommodate your limitation? Yes No

13. Have you ever been dismissed or asked to resign. from any teaching position? Yes No
If yes, explain:

14. Would contacting your employer jeopardize your employment? Yes No
Comments:

15. Have you ever **been convicted of a felony or a misdemeanor?** (A conviction will not necessarily disqualify an applicant from the position applied for.) Yes No

OFFENSES			
DATES			

16. CALIFORNIA CREDENTIAL INFORMATION: (Please list out-of-state credentials on a separate sheet)

CBEST Date Passed: _____ (1) _____
 Credential(s) now held (1) _____ (2) _____ Exp. (2) _____
 (3) _____ (4) _____ date (3) _____
 If no credential now have you applied for one? Yes No (4) _____
 If yes, what type? (1) _____ (2) _____ Date (1) _____
 Applied (2) _____

17. My placement papers are on file with the following placement office, _____

Address _____ City _____ State _____ Zip Code _____
 Under the name of _____

PLEASE HAVE YOUR PLACEMENT PAPERS FORWARDED TO THIS OFFICE IMMEDIATELY.

18. Professional references: (include only those who have knowledge of your teaching experience: e.g. superintendent, principal, supervisor, and student teaching master teachers.)

NAME	PHONE	POSITION	ADDRESS

19. List your work record. Begin with your PRESENT job and list in reverse order. Include self-employment and periods of unemployment for the past TEN YEARS

Dates of Work From: _____ Mo. Yr. To: _____ Mo. Yr. Full Time? <input type="checkbox"/> Part Time? <input type="checkbox"/> Last salary \$ _____	Your previous job title	Name of Employer or Company
	Describe your duties fully	Phone Number
		Type of Business or Organization
		Your supervisor's name and job title
		Reason for leaving

Dates of Work From: _____ Mo. Yr. To: _____ Mo. Yr. Full Time? <input type="checkbox"/> Part Time? <input type="checkbox"/> Last salary \$ _____	Your previous job title	Name of Employer or Company
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OTHER
