



# LUTHER CENTER FOR LEARNING

## Application for Employment

|  |        |                        |                                     |
|--|--------|------------------------|-------------------------------------|
| NAME LAST  |        | FIRST                  | MIDDLE                              |
| ARE YOU OVER THE AGE OF 18?<br>? YES                      ? NO                             |        | SOCIAL SECURITY NUMBER | TODAY'S DATE                        |
| INDICATE POSITION APPLIED FOR<br>K   1   2   3   4   5   6   7   8      PRINCIPAL/DIRECTOR |        |                        | SALARY DESIRED                      |
| PRESENT ADDRESS  | STREET | CITY                   | STATE                      ZIP CODE |
| PERMANENT ADDRESS (IF DIFFERENT THAN ABOVE)  |        |                        |                                     |
| IN EMERGENCY NOTIFY  |        |                        | EMERGENCY TELEPHONE                 |

### SPECIAL TRAINING

|   |  |  |  |  |
|---|--|--|--|--|
| INDICATE THE AREA(S) THAT YOU ARE CAPABLE AND WILLING TO TEACH IN YOUR CLASSROOM:<br>? PIANO                      ? VOCAL MUSIC                      ? ART                      ? PHYSICAL EDUCATION                      ? COMPUTERS |  |  |  |  |
| IDENTIFY FOREIGN/WORLD LANGUAGE(S) YOU CAN READ AND SPEAK FLUENTLY  |  |  |  |  |
| LIST ANY OTHER SPECIAL TRAINING YOU FEEL IS PERTINENT TO THE POSITION FOR WHICH YOU ARE APPLYING.   |  |  |  |  |

### EDUCATION RECORD

| NAME OF SCHOOL | LOCATION | YEARS ATTENDED | DID YOU GRADUATE? | YEAR LEFT SCHOOL | MAJOR/MINORS | DEGREE RECEIVED |
|----------------|----------|----------------|-------------------|------------------|--------------|-----------------|
| HIGH SCHOOL    |          |                |                   |                  |              |                 |
| COLLEGE        |          |                |                   |                  |              |                 |
| COLLEGE        |          |                |                   |                  |              |                 |
| OTHER          |          |                |                   |                  |              |                 |
| OTHER          |          |                |                   |                  |              |                 |

### PROFESSIONAL INFORMATION

| TYPE OF CERTIFICATE   | DATE ISSUED | EXPIRATION DATE | STATE |
|---|-------------|-----------------|-------|
|   |             |                 |       |
| HAS YOUR CERTIFICATE EVER BEEN DENIED, SUSPENDED OR REVOKED? IF YES, PLEASE EXPLAIN.<br>? YES                      ? NO |             |                 |       |
| HAS PROFESSIONAL DISCIPLINE OF ANY KIND EVER BEEN IMPOSED? IF YES, PLEASE EXPLAIN.<br>? YES                      ? NO   |             |                 |       |

HAVE YOU BEEN DISCHARGED OR FORCED TO RESIGN FROM A POSITION IN THE PAST TEN YEARS? IF YES, PLEASE EXPLAIN.

? YES                      ? NO

ARE YOU NOW THE SUBJECT OF A COMPLAINT MADE TO THE OFFICE OF THE SUPERINTENDENT OF PUBLIC INSTRUCTION (OSPI) WHICH ASKS OSPI TO INVESTIGATE WHETHER OR NOT YOU HAVE COMMITTED AN ACT OF UNPROFESSIONAL CONDUCT, AS DEFINED IN WAC 180-87, OR WHETHER YOU ARE OF GOOD MORAL CHARACTER AND PERSONAL FITNESS AS DEFINED IN WAC 180-86-013? IF YES, PLEASE EXPLAIN.

? YES                      ? NO

**TEACHING AND/OR ADMINISTRATIVE EXPERIENCE**

| SCHOOL/DISTRICT    |           | EMPLOYMENT DATES | SALARY AND % OF FULL-TIME | POSITION | ELIGIBLE FOR REHIRE |
|--------------------|-----------|------------------|---------------------------|----------|---------------------|
| NAME               |           |                  |                           |          | YES                 |
| ADDRESS            |           |                  |                           |          | NO                  |
| SUPERVISOR         | TELEPHONE | RESPONSIBILITIES |                           |          |                     |
| REASON FOR LEAVING |           |                  |                           |          |                     |
| SCHOOL/DISTRICT    |           | EMPLOYMENT DATES | SALARY AND % OF FULL-TIME | POSITION | ELIGIBLE FOR REHIRE |
| NAME               |           |                  |                           |          | YES                 |
| ADDRESS            |           |                  |                           |          | NO                  |
| SUPERVISOR         | TELEPHONE | RESPONSIBILITIES |                           |          |                     |
| REASON FOR LEAVING |           |                  |                           |          |                     |
| SCHOOL/DISTRICT    |           | EMPLOYMENT DATES | SALARY AND % OF FULL-TIME | POSITION | ELIGIBLE FOR REHIRE |
| NAME               |           |                  |                           |          | YES                 |
| ADDRESS            |           |                  |                           |          | NO                  |
| SUPERVISOR         | TELEPHONE | RESPONSIBILITIES |                           |          |                     |
| REASON FOR LEAVING |           |                  |                           |          |                     |
| SCHOOL/DISTRICT    |           | EMPLOYMENT DATES | SALARY AND % OF FULL-TIME | POSITION | ELIGIBLE FOR REHIRE |
| NAME               |           |                  |                           |          | YES                 |
| ADDRESS            |           |                  |                           |          | NO                  |
| SUPERVISOR         | TELEPHONE | RESPONSIBILITIES |                           |          |                     |
| REASON FOR LEAVING |           |                  |                           |          |                     |

**EMPLOYMENT RECORD (EXCLUDING TEACHING)**

| EMPLOYER   |  | EMPLOYMENT DATES   | SALARY | POSITION | ELIGIBLE FOR REHIRE |
|------------|--|--------------------|--------|----------|---------------------|
| NAME       |  |                    |        |          | YES                 |
| ADDRESS    |  |                    |        |          | NO                  |
| SUPERVISOR |  | REASON FOR LEAVING |        |          |                     |
| EMPLOYER   |  | EMPLOYMENT DATES   | SALARY | POSITION | ELIGIBLE FOR REHIRE |
| NAME       |  |                    |        |          | YES                 |
| ADDRESS    |  |                    |        |          | NO                  |
| SUPERVISOR |  | REASON FOR LEAVING |        |          |                     |
| EMPLOYER   |  | EMPLOYMENT DATES   | SALARY | POSITION | ELIGIBLE FOR REHIRE |
| NAME       |  |                    |        |          | YES                 |
| ADDRESS    |  |                    |        |          | NO                  |
| SUPERVISOR |  | REASON FOR LEAVING |        |          |                     |

**HONORS, AWARDS, ACCOMPLISHMENTS (scholarships, special recognition):**

|  |
|--|
|  |
|  |

**LICENSING**

First Aid Certificate      ? Yes    ? No    If yes, expiration date: \_\_\_\_\_

CPR Certificate            ? Yes    ? No    If yes, expiration date: \_\_\_\_\_

**REFERENCES** List additional professional references (other than immediate supervisors provided above) e.g., superintendents, administrators, principals, supervising teachers and college supervisors under whom you have worked or taught or persons who have firsthand knowledge of your personal and professional competencies.

| NAME | ADDRESS (STREET, CITY, STATE, ZIP) | OFFICIAL POSITION | TELEPHONE |
|------|------------------------------------|-------------------|-----------|
| 1.   |                                    |                   | (W)       |
|      |                                    |                   | (H)       |
| 2.   |                                    |                   | (W)       |
|      |                                    |                   | (H)       |
| 3.   |                                    |                   | (W)       |
|      |                                    |                   | (H)       |
| 4.   |                                    |                   | (W)       |
|      |                                    |                   | (H)       |

I certify that the information given by me to Luther Center for Learning is true and complete to the best of my knowledge. I understand that, if I am employed, discovery that I gave false information may result in immediate dismissal.

I further certify that I am not engaged in outside activity or business that could be considered in conflict with Luther Center for Learning's interests, nor will I become engaged in such activity or business if employed.

I authorize Luther Center for Learning to solicit information regarding my character, general reputation, previous employment and similar background information and to contact any and all former employers and references I have given to Luther Center for Learning. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the

furnishing of such information. I further waive all rights I may have under state law to receive a copy of any written statement provided by any of my former employers to Luther Center for Learning. If employed, I release Luther Center for Learning from any liability for future references it may provide regarding my work history at the school.

In consideration of my employment, I agree that my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of either Luther Center for Learning or myself. I understand that no representative of Luther Center for Learning, other than the Principal or President of the Board of Directors, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

If employed, I further agree that if Luther Center for Learning advances any paid leave before it has been accrued, or advances or loans me any money during the course of my employment, or if I lose, damage, or fail to return any school property, Luther Center for Learning is authorized to deduct from my wages sufficient funds to repay such loans or advances or to replace its property.

SIGNATURE OF APPLICANT

DATE

**ELEMENTARY KINDERGARTEN, PRIMARY and INTERMEDIATE TEACHER APPLICANTS**

On a separate attachment please submit your views in each of the following areas. Your responses should total no more than three typewritten pages.

1. Briefly describe your educational philosophy.
2. Please describe how you would lead, motivate and encourage students of all abilities to work to their potential. Use personal experiences for illustration.
3. Please describe how you would use technology as a tool to increase student achievement.
4. Please describe your background in literacy and reading strategies.
5. Please describe how your faith relates to your role as a teacher.