

Dear Applicant:

Thank you for your interest in obtaining employment with the Granite Falls School District. The following guidelines should be followed in completing the application process.

1. Complete the enclosed application and include the following support information:
 - a) Pre-Employment Background Questionnaire, Applicant Disclosure Form, appropriate insert(s) for position(s) desired, Affirmative Action Survey (voluntary-printed on the back of this letter), and Washington State Sexual Misconduct Disclosure Release form for EACH previous employer -- make copies as necessary and fill in each form through to the signature line for all previous employment. Send all forms with application. Human Resources will mail the forms).
 - b) A resume which states employment record, educational training, professional experience, special interests, volunteer work, professional objective, and other information you believe pertinent.
 - c) A letter of application, stating the position and job number for which you are applying and what skills or special abilities you will bring to the position.
 - d) Any other materials requested on a particular job announcement.

→ 3. Enclosed is one copy of a Professional Reference Form. You may make as many copies as you wish to give to past employers/supervisors. We suggest that you also give them a stamped envelope that is addressed to the Granite Falls School District to ensure confidentiality and to encourage swift completion and mailing of your job reference. At least two Professional Reference Forms returned (preferable) and/or two work-related letters of recommendation.

4. Interviews are scheduled by the Personnel Office. Please contact the Personnel Office regarding position openings and interviews.
5. When the interview and selection process is complete, the recommended candidate will be offered the position and all other interviewed candidates will be notified of the decision.
6. If a position within the Granite Falls School District is offered to you and accepted, be prepared to furnish documentation of authorization to work in the United States.

Your completed application packet should be sent or delivered to the Personnel Office at the above address. Classified applications will be retained in the current files for 90 days following date of receipt. To request that your application remain current beyond 90 days, send a written notice to the Personnel Office at the same address.

Thank you for your application. Feel free to contact our office at the number listed above, if you have any questions regarding these procedures.

Sincerely,

Susan King
Administrative Personnel Secretary

sk:sk
enclosure

“Learning is First”
Granite Falls School District
Affirmative Action Voluntary Survey

Government agencies at times require periodic reports on the sex, ethnicity, disability, veteran and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action Program. **SUBMISSION OF THIS INFORMATION IS VOLUNTARY.**

| | | |
|---------------------|-------|----------|
| Name (Please Print) | Date | |
| Address | | |
| City | State | Zip Code |

Check One: Male Female

Check one of the following: (Ethnic Origin)

- Caucasian Hispanic Origin American Indian/Eskimo/Aleut
 Black/African American Asian/Pacific Islander
 Other, please specify _____

Check if any of the following are applicable:

- Veteran Status Disabled Veteran Disabled Individual

Employees are treated without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or disability, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmation Action responsibilities where they apply.

The purpose for this data record is to comply with government recordkeeping, reporting, and other legal requirements. Periodic reports are made to the government on the following information. The completion of the data record is optional. If you choose to volunteer the requested information please note that all data records are kept in a confidential file and are not a part of your application for employment or personnel file. Please note: **YOUR COOPERATION IS VOLUNTARY. INCLUSION OR EXCLUSION OF ANY DATA WILL NOT AFFECT ANY EMPLOYMENT DECISIONS.**



Granite Falls School District #332

307 North Alder • Granite Falls, WA 98252 • (360) 691-7717

Application for Classified Personnel

Position(s) Desired

Date of Application

APPLICATION CHECKLIST

Please use the following checklist as your guide to fulfilling the requirements for a complete application file. Only complete application files will be considered for screening. Applications will be considered current for 90 days unless written notification is received to maintain your application file as current.

- application packet forms (5 required)
 - * Application Form
 - * Applicant Disclosure Form
 - * Pre-Employment Background Questionnaire
 - letter of application which includes position title, your qualifications and related skills/special abilities
 - at least two work-related letters of recommendation and/or two Professional Reference forms returned
 - resume
 - any other materials requested on a particular job announcement
- * Application insert for desired position(s)
 - * Professional Reference Form (see applicant letter)
 - * Affirmative Action Questionnaire (voluntary)

PERSONAL INFORMATION

| | | |
|---|------------|------------------------|
| Last Name | First Name | Middle Name |
| | | () |
| Address | City | State |
| | | Zip |
| | | Telephone |
| | | () |
| Other name(s) under which records may be listed | | Social Security Number |
| | | Message Telephone |

PREFERENCES (Check all that apply)

- Full Time
 Part Time
 Substitute
 Specialist _____

EDUCATION

| Name of Institution City, State | Dates Attended Mo/Yr to Mo/Yr | Degree/Diploma and Date Rec'd | Major and Minor(s) |
|------------------------------------|----------------------------------|----------------------------------|-----------------------|
| High School/GED | | | |
| College/University | | | |
| Vocational School | | | |
| Business School | | | |

GRANITE FALLS SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER.

Granite Falls School District No. 332 complies with all Federal and State rules and regulations and does not discriminate on the basis of race, color, national origin, sex or disability. This holds true for all access to, admission to, or operations of programs, services or activities and/or employment and opportunities. Inquiries regarding compliance procedures may be directed to the school district's Title IX/RCW 28A.640 Officer and/or Section 504/ADA Coordinator: Granite Falls School District No. 332, 307 North Alder Avenue, Granite Falls, WA 98252, (360)691-7717. Individuals with disabilities who may need modification in employment opportunities should contact Vervia Gabriel at the Administration Office at (360) 691-7717.

TRAINING

| Credit, non-credit, workshops, correspondence courses, other education and training: List name/type of course | Mo/Year Taken | Grade/Credit Received |
|--|---------------|-----------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

EMPLOYMENT HISTORY Start with last or present position and work backward

| EMPLOYER Address/Phone | Your Position/ Job Assignment | Dates Mo/Yr to Mo/Yr | Name of Supervisor & Phone Number | Salary (Start/End) |
|---------------------------|----------------------------------|-------------------------|--------------------------------------|-----------------------|
| | | | | |
| Duties: | | | Reason for Leaving: | |
| EMPLOYER Address/Phone | Your Position/ Job Assignment | Dates Mo/Yr to Mo/Yr | Name of Supervisor & Phone Number | Salary (Start/End) |
| | | | | |
| Duties: | | | Reason for Leaving: | |
| EMPLOYER Address/Phone | Your Position/ Job Assignment | Dates Mo/Yr to Mo/Yr | Name of Supervisor & Phone Number | Salary (Start/End) |
| | | | | |
| Duties: | | | Reason for Leaving: | |
| EMPLOYER Address/Phone | Your Position/ Job Assignment | Dates Mo/Yr to Mo/Yr | Name of Supervisor & Phone Number | Salary (Start/End) |
| | | | | |
| Duties: | | | Reason for Leaving: | |

REFERENCES/OTHER INFORMATION

List below three persons, other than relatives, who have known you during the past three years. Include current employer or most recent employer(s) or supervisors for whom you have volunteered.

We reserve the right to call other references not listed.

| Name of Reference/ Occupation | Position/Relationship | Mailing Address | Phone Number (include area code) |
|----------------------------------|-----------------------|-----------------|-------------------------------------|
| | | | |
| | | | |
| | | | |

Are you a United States Veteran? Yes No

Are you authorized to work in the United States? Yes No (Documentation of authorization to work in the United States will be required if an offer of employment is made and accepted.)

Have you previously been employed by or applied to this school district? Yes No If yes, please indicate during which date(s) and, if employed, in what capacity and under what name: _____

Are you or have you been a member of the Washington State Department of Retirement? Yes No
If so, which plan? _____ Have you retired under this plan? Yes No

Give the names and relationships of any relatives you have working for the district. _____

To assist us in finding the proper position for you in our school district, please use the space below to summarize any additional information you feel is necessary to describe your work experience and qualifications that may not be adequately covered by this application form. Please include any Granite Falls School District experience.

APPLICANT'S STATEMENT

I hereby certify that all the information given is true to the best of my knowledge.

I give the District the right to investigate all references and to secure additional job-related information from all my employers, references, and academic institutions. I hereby release from liability those employers, references, academic institutions, and the district from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the District. I also agree that information gained through such investigations, which shall become a part of this application, will be regarded as confidential and shall not be revealed to me.

I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials, employment references and background. I understand that any false or misleading information given in my application or interview(s) will be sufficient cause for rejection of my application if the District has not employed me and for immediate dismissal if the District has employed me. I further understand that, if employed, I will provide verification of any certifications, education, and experience, and agree to accept assignments as made by the superintendent and school board and to abide by all rules and regulations of the District.

I also authorize the District to supply information about my employment record, in whole or in part, in confidence to any prospective employer, government agency, or other party having a legal and proper interest, and I hereby release the District from any and all liability for its providing this information.

Signature of Applicant

Date

**Granite Falls School District
DISCLOSURE FORM**

Pursuant to Chapter 43.43.830 RCW (revised, 2007) & RCW 9A.42.100 (revised, 2002)

In accordance with RCW 43.43.830, applicants and prospective volunteers are required to complete this disclosure form. In addition, applicants who have been offered employment or volunteer assignments as outlined in said law, will be required to complete a Request for Criminal History form, possibly including fingerprinting. These requests will be forwarded to the Washington State Patrol for disclosure of any applicable charges or finding. Applicants may be employed on a conditional basis pending completion of such background investigation. Volunteers will be retained on the same conditional basis.

Answer yes or no to each listed item. If the answer is yes to any item, explain in the area provided, indicating the charge or finding, the date, and the court(s) involved.

1. Have you ever been convicted of any crimes against persons as defined in Section 1 of Chapter 486, Laws of 1987, and listed as: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree assault of a child; first, second, or third degree rape; first, second, or third degree rape of a child; first or second degree robbery; first or second degree theft; forgery; first degree arson; first degree burglary; first or second degree manslaughter; first, second, or third degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment; endangerment with a controlled substance; child abuse or neglect as defined in RCW [26.44.020](#); first or second degree custodial interference; first or second degree custodial sexual misconduct; malicious harassment; first, second, or third degree child molestation; first or second degree sexual misconduct with a minor; commercial sexual abuse of a minor; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; criminal abandonment; or any of these crimes as they may be renamed in the future? **Answer _____ If yes, explain below.**
-

2. Have you ever been found in any dependency action under RCW 13.34.030(2)(b) to have sexually assaulted or exploited any minor or to have physically abused any minor? **Answer _____ If yes, explain below.**
-

3. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor? **Answer _____ If yes, explain below.**
-

4. Have you ever been found in a disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor? **Answer _____ If yes, explain below.**
-

5. Have you ever been convicted of a crime to manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance? **Answer _____ If yes, explain below.**
-

Pursuant to RCW 9A.72.085, I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I understand that my continued employment is conditional upon the fingerprinting and background checks that the Granite Falls School District will conduct.

Applicant Signature

Date

PROFESSIONAL REFERENCE FORM FOR CLASSIFIED STAFF

→Position Applied For:

Important: The information on this form is confidential! Please return it completed to the Granite Falls School District. I understand that this is a confidential recommendation report. I hereby waive my right to see the recommendation.

Name of Applicant (Please Print)

Signature of Applicant

Date

_____ has applied for a classified position in the Granite Falls School District. We request that you carefully evaluate the work experience of the applicant on the checklist below.

| CATEGORY | Upper 5% | Upper 10% but not Upper 5% | Upper 25% but not upper 10% | Upper 50% but not upper 25% | Lowest 50% | No basis for Judgment |
|--|----------|----------------------------|-----------------------------|-----------------------------|------------|-----------------------|
| 1. Professional Skills: Highly developed professional skills in particular field; has knowledge and training of current practices and trends; applies new ideas and skills; able to assess needs of situation and prescribe appropriate action; takes advantage of opportunities for professional growth; open and receptive to new/different ideas; accurate, thorough, and effective work habits and results; orderly work station. | | | | | | |
| 2. Relation to Peers: Develops favorable relationships with peers; promotes harmony in the workplace; respects others and deservedly earns respect; has tolerance and understanding of others' views; relates to peers of varying socioeconomic, ethnic backgrounds, and various disabilities; sensitive/considerate of peers; works in cooperation/courtesy with peers. | | | | | | |
| 3. Modeling Appropriate Behavior: Exhibits appropriate professional demeanor, behavior, and attire; is tactful yet communicates clearly and effectively; possesses customer service attitude; takes pride in work; follows safety policies and procedures. | | | | | | |
| 4. Initiative & Enthusiasm: Demonstrates willingness to and often exceeds minimum performance required by job; displays overall optimism and zeal, willing to be involved, participates in workplace objectives (team player); uses facial expression, body language, and vocal tone that demonstrates a caring and warmth toward individuals and an enthusiasm for service; displays positive attitude and outlook. | | | | | | |
| 5. Maturity & Judgement: Possesses sound judgement and diplomacy; is open-minded, tolerant, patient; takes time to listen to others; resourceful; can assess dimensions of problems, determine priorities and reach quick, accurate solutions; decision-making based on considering appropriate information; tactfully presents ideas/views w/o turning off the listener; can be trusted with confidential information. | | | | | | |
| 6. Dependability: Reliable and conscientious in all activities; exemplary in fulfilling the duties in work assignment, following directions, and meeting deadlines; responsibly handles problems w/n scope of authority; adheres to assigned work hours and days. | | | | | | |

Please complete back of form →

HUMAN RESOURCES
Granite Falls School District No. 332
307 North Alder Avenue
Granite Falls, WA 98252
(360) 691-7717 FAX (360) 691-4459

PRE-EMPLOYMENT BACKGROUND QUESTIONNAIRE

Please complete the following questions and sign the declaration. Any falsification or deliberate misrepresentation, including omission of a material fact or failure to complete any part of your application or this questionnaire can be grounds for denial of employment or continued employment with the Granite Falls School District.

ALL REQUIRED DOCUMENTATION REQUESTED BELOW MUST ACCOMPANY THIS FORM. ALL QUESTIONS MUST BE ANSWERED. IF ADDITIONAL SPACE IS NEEDED, ATTACH A SEPARATE SHEET OF PAPER.

SECTION I - PERSONAL INFORMATION (please print or type)

1. NAME: Last First Middle

2. ADDRESS: (complete mailing address)

3. TELEPHONE:
BUSINESS () HOME ()

4. Please list all former names (a) you have used when working for another employer or (b) by which you are known to reference. (If more than three, list on a separate sheet of paper.)

SECTION II - PROFESSIONAL FITNESS

If you answer "yes" to questions 1 through 4, on a separate sheet of paper, give a complete explanation, including duties, circumstances, and any supporting documentation.

Yes No

1. Have you ever been dismissed, discharged or fired from any employment?
2. Have you ever resigned from or otherwise left any employment while allegations of misconduct on your part were pending or under investigation?
3. Have you ever been disciplined by a past or present employer because of allegations of misconduct?
4. Are you currently or have you ever been the subject of any investigation or inquiry by an employer because of allegations of misconduct on your part?

SECTION III - CRIMINAL HISTORY

1. Have you ever been convicted of any crime? (Note: For the purpose of this question "convicted" includes (1) all instances in which a plea of guilty or nolo contendere is the basis of conviction, and (2) all proceedings in which a sentence has been suspended or deferred.) You need not list traffic violations for which a fine or forfeiture of less than \$150 was imposed.

Yes **No**

- | | | | | |
|--------------------------|--------------------------|----|----|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 2. | a. | Do you currently have any outstanding criminal charges or warrants of arrest pending against you in Washington? |
| <input type="checkbox"/> | <input type="checkbox"/> | | b. | Do you currently have any outstanding criminal charges or warrants of arrest pending against you in any other state, province, territory, and/or country? |

If you answered "yes" to questions 1 or 2 of (Section III), please provide the following:

- | | | | | |
|--------------------------|--------------------------|----|----|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 3. | a. | A detailed statement including what occurred, the nature of the offense, charge or warrant; |
| | | | b. | The name and address of the arresting agency; |
| | | | c. | The date of the arrest; |
| | | | d. | The final disposition, if any; |
| | | | e. | If a court was involved, the name and address of the court; |
| | | | f. | The complete arrest report and sentence and judgement; and |
| | | | g. | A complete driving abstract for five years if the arrest was driving related. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. | | Are you presently under investigation in any jurisdiction for possible criminal charges? If your answer is "yes", identify agency and location (street address, city, state): |

A "yes" answer to questions 1 through 3 above will not necessarily bar you from employment.

SECTION IV - FITNESS

Yes **No**

- | | | | |
|--------------------------|--------------------------|----|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. | Are you able to perform the essential functions of the certificated/classified position(s) for which you have applied with or without reasonable accommodation? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. | Do you currently use illegal drugs? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. | Have you used illegal drugs in the last year? If your answer is "yes," explain on a separate sheet of paper. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. | Have you ever been found in any dependency or domestic relation matter to have sexually assaulted or exploited any minor? |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. | Have you ever been found in any dependency or domestic relation matter to have physically abused any person? |

If you answered "yes" to questions 4 or 5, attach copies of any court orders entered in the above proceeding.

DECLARATION

I, _____ certify (or declare) under the penalty of perjury under the laws of the State of Washington that the foregoing and all information included in the application is true and correct.

If the information provided or answer(s) to any question on the application or the Pre-Employment Background Questionnaire change prior to my being hired, I understand that I must immediately notify the Granite Falls School District.

I understand I must answer this application truthfully and completely. Any falsification or deliberate misrepresentation, including omission of a material fact, in completion of this application can be grounds for denial of employment or continued employment.

Signature

Date

City/State



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 Office of Professional Practices
 Old Capitol Building
 PO BOX 47200
 Olympia WA 98504-7200

WASHINGTON STATE SEXUAL MISCONDUCT DISCLOSURE RELEASE

| | |
|------------|--------------------------|
| To: | SCHOOL DISTRICT EMPLOYER |
| | PERSONNEL DEPARTMENT |
| | STREET ADDRESS |
| | CITY, STATE, ZIP |

The named applicant is under consideration for a position in our district. The Legislature has determined that additional safeguards are necessary in the hiring of school district employees to ensure the safety of Washington's school children. The individual whose name appears below has had previous employment with your organization. As a former employer, we request you provide the information requested on this form within 20 business days as required by state law (RCW 28A.400). Sexual misconduct definitions are found in WAC 180-87-080. Your assistance is appreciated.

| | | |
|---|---|--------------|
| Return all completed information to: | SCHOOL DISTRICT | |
| | Granite Falls School District/Human Resources | |
| | ADDRESS | |
| | 307 North Alder Avenue, Granite Falls, WA 98252 | |
| | PHONE | FAX |
| | 360-283-4309 | 360-691-7717 |

Employing School Receipt Date _____ Recipient Name _____

| | |
|--|-----------------|
| APPLICANT'S NAME (FIRST, MIDDLE, LAST) | |
| FULL NAME WHEN LAST EMPLOYED WITH ORGANIZATION | |
| SOCIAL SECURITY NUMBER | CERTIFICATE NO. |
| APPROXIMATE DATES OF EMPLOYMENT | |
| POSITION(S) | |

I authorize you to release to the school/district listed above, all information related to any acts of sexual misconduct that the school district has made a determination that there is sufficient information to conclude that the abuse or misconduct occurred and that the abuse or misconduct resulted in the employee's leaving his or her position at the school district. Such information includes copies of all related documents, including any rebuttal documents, in personnel, investigative or other files, in accordance with RCW 28A.400. I release the above employer and employees acting on behalf of the employer from any liability for providing information described in this document.

 Applicant Signature Date

| | |
|--|---|
| <input type="checkbox"/> No sexual misconduct materials were found. <input type="checkbox"/> Yes, sexual misconduct materials are available. Please contact for more information. <input type="checkbox"/> No record of employment. | Complaint of sexual misconduct was filed with OSPI. <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ Former Employer Representative Signature | _____ Title |
| | _____ Date |