

**EMPLOYMENT APPLICATION**  
**MANAGEMENT**

**POSITION DESIRED:** \_\_\_\_\_  
 Classified  Certificated

**Application Requirements**

*In order for your application to be considered you must include the following:*

- |  |  |
|--|--|
| <input type="checkbox"/> KCOE Application Form and Resume  | <input type="checkbox"/> Copies of Degree and Credential Documents |
| <input type="checkbox"/> Formal Letter of Interest   | <input type="checkbox"/> Authorization to Release Information Form |
| <input type="checkbox"/> One to Three Letters of Reference<br>(at least one from within the past year) | <input type="checkbox"/> Copy of Transcripts                       |
|  | <input type="checkbox"/> Copy of CBEST Verification (if required)  |

*\*See back page for additional application requirements and guidelines\**

**Personal Information**

Name: \_\_\_\_\_ Social Security # XXX-XX- \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_  
 FAX # \_\_\_\_\_ Cellular # \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

Have you ever worked for a County Office of Education or a School District?  YES  NO

If YES, when, where and in what capacity? \_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

Are you related to any employee of this organization?  YES  NO

If YES, list name and relationship to you: \_\_\_\_\_

**Record of Teaching and/or Professional Experience**

Are you currently under contract with any other district/county office?  YES  NO

If YES, give name of district/county office and date of contract expiration: \_\_\_\_\_

List all paid experience in chronological order, most recent first. Please account for all gaps in employment.

(1) Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Please check type of school:  Public  Private  Vocational  Community School  Other

Position Title: \_\_\_\_\_

Number of years employed in a **fully-credentialed** position: \_\_\_\_\_  Full-time  Part-time

Number of years employed as a: Substitute/Per diem: \_\_\_\_\_ Intern: \_\_\_\_\_ Emergency Permit/Pre-Intern: \_\_\_\_\_

Inclusive Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Name and Title of Immediate Supervisor: \_\_\_\_\_

OK to contact?  YES  NO Work phone # \_\_\_\_\_ Other phone # \_\_\_\_\_

Brief description of job duties: \_\_\_\_\_

Reason for leaving position: \_\_\_\_\_

(2) Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Please check type of school:  Public  Private  Vocational  Community School  Other  
 Position Title: \_\_\_\_\_  
 Number of years employed in a **fully-credentialed** position: \_\_\_\_\_  Full-time  Part-time  
 Number of years employed as a: Substitute/Per diem: \_\_\_\_\_ Intern: \_\_\_\_\_ Emergency Permit/Pre-Intern: \_\_\_\_\_  
 Inclusive Dates: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Name and Title of Immediate Supervisor: \_\_\_\_\_  
 OK to contact?  YES  NO Work phone # \_\_\_\_\_ Other phone # \_\_\_\_\_  
 Brief description of job duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving position: \_\_\_\_\_  
 \_\_\_\_\_

(3) Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Please check type of school:  Public  Private  Vocational  Community School  Other  
 Position Title: \_\_\_\_\_  
 Number of years employed in a **fully-credentialed** position: \_\_\_\_\_  Full-time  Part-time  
 Number of years employed as a: Substitute/Per diem: \_\_\_\_\_ Intern: \_\_\_\_\_ Emergency Permit/Pre-Intern: \_\_\_\_\_  
 Inclusive Dates: From: \_\_\_\_\_ To: \_\_\_\_\_  
 Name and Title of Immediate Supervisor: \_\_\_\_\_  
 OK to contact?  YES  NO Work phone # \_\_\_\_\_ Other phone # \_\_\_\_\_  
 Brief description of job duties: \_\_\_\_\_  
 \_\_\_\_\_  
 Reason for leaving position: \_\_\_\_\_  
 \_\_\_\_\_

**References**

Name: _____	Occupation: _____	Relationship: _____
Address: _____		Phone # _____
Name: _____	Occupation: _____	Relationship: _____
Address: _____		Phone # _____
Name: _____	Occupation: _____	Relationship: _____
Address: _____		Phone # _____
Name: _____	Occupation: _____	Relationship: _____
Address: _____		Phone # _____

**Record of Educational and Professional Preparation**

**List highest attainment first**

(1) Name of College or University: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Field of Study: Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
 Dates Attended: From: \_\_\_\_\_ To: \_\_\_\_\_ Degree Awarded: \_\_\_\_\_

(2) Name of College or University: \_\_\_\_\_  
Address: \_\_\_\_\_  
Field of Study: Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
Dates Attended: From: \_\_\_\_\_ To: \_\_\_\_\_ Degree Awarded: \_\_\_\_\_

(3) Name of College or University: \_\_\_\_\_  
Address: \_\_\_\_\_  
Field of Study: Major: \_\_\_\_\_ Minor: \_\_\_\_\_  
Dates Attended: From: \_\_\_\_\_ To: \_\_\_\_\_ Degree Awarded: \_\_\_\_\_

**List additional Education on a separate sheet.**

Number of Post Baccalaureate Units: \_\_\_\_\_  Semester  Quarter

*(Correct number of units are very important as they are used to determine salary placement.)*

List languages, other than English, that you are familiar with:

*(If this position does not require bilingual skills, this question is optional)*

(1) \_\_\_\_\_ (2) \_\_\_\_\_  
 Read  Speak  Write  Fluent  Some  Read  Speak  Write  Fluent  Some

**Credential Information**

Do you hold a valid California Teaching Credential?  YES  NO

List all types of valid K-12 credentials you currently hold:

- (1) Type/Authorization: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_
- (2) Type/Authorization: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_
- (3) Type/Authorization: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_
- (4) Type/Authorization: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ State: \_\_\_\_\_

Additional Certificates Held:  BBC  BCLAD  CLAD  LDS  Other \_\_\_\_\_

If you do not currently hold a valid teaching credential, through which college or university have you applied?  
\_\_\_\_\_ Date applied: \_\_\_\_\_

Date CBEST passed: \_\_\_\_\_ Anticipated test date: \_\_\_\_\_

Have you taken the MSAT and/or CSET Exam?  YES  NO Passed?  YES  NO Date: \_\_\_\_\_

Have you taken the PRAXIS/SSAT and/or CSET Exam?  YES  NO Passed?  YES  NO Date: \_\_\_\_\_

Have you ever taught or been an administrator in California?  YES  NO

Have you ever had a credential suspended or revoked, or received any other type of disciplinary action from any teaching or licensing agency of any type, from any state or country?  YES  NO

If YES, please indicate action:  Revocation  Suspension  Other: \_\_\_\_\_

Explain when, where, why action was taken, and current status (*Explanation Required*): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## APPLICATION REQUIREMENTS AND GUIDELINES

Thank you for your interest in employment with Kings County Office of Education. Please keep in mind the following important requirements as you prepare your application

- 1) The employment application represents you; it is to your advantage to fill out the application form carefully, neatly, and completely. Do not leave blank spaces with "SEE RESUME" written across them. Write on the application form the information requested and then attach a resume or other supplemental material intended to expand and document the statements made on the application.
- 2) In order to avoid misfiling or loss, make sure that letters of recommendation, resumes, and other supplemental material sent under separate cover include your name and the position for which you are applying.
- 3) Each position requires a separate application.
- 4) It is your responsibility to submit a complete application. Human Resources CANNOT DUPLICATE materials in order to complete your application.
- 5) Application materials submitted cannot be returned and become the property of Kings County Office of Education. Copies are accepted unless noted otherwise. We cannot honor later requests to make copies of application materials submitted.
- 6) A selection committee will review and evaluate applications to select a limited number of candidates to interview. Meeting the minimum qualifications for a position does not assure the candidate an interview. Consideration will be given to factors other than education and experience, including, but not limited to, personal development, ability to work with others, and initiative.
- 7) Applicants selected for an interview will be contacted by telephone. Applicants not chosen for an interview will receive notification by mail.
- 8) No fax applications will be accepted.
- 9) Incomplete applications will not be considered for employment.

## REQUIRED APPLICANT STATEMENT

- (1) Have you ever been convicted of a felony or a misdemeanor?  Yes  No  
*List all convictions, even if such conviction was later expunged from your record pursuant to Penal Code sections 667.6(c) and 1192.7(c). A conviction includes a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or jury. If YES, a letter of explanation must accompany your application. However, please note that you are not required to disclose certain types of criminal convictions. They include "marijuana" related convictions that are more than two (2) years old (from the date of this application) for violation of the following Health & Safety Code sections: subdivision (b) of section 11357, subdivision (c) of section 11357, subdivision (b) of section(s) 11360, 11364, 11365, 11550 and 11366.*
- (2) Can you, after employment, submit verification of your legal right to work in the United States?  Yes  No
- (3) Do you object to the contacting of references other than those provided?  Yes  No
- (4) I have read the job description and can perform the essential functions of the position with or without reasonable accommodation.  Yes  No
- (5) Have you been dismissed or asked to resign from any position?  Yes  No  
*(If YES, a letter of explanation must accompany application.)*
- (6) I understand the Kings County Office of Education participates in pre-employment agility testing and a Worker's Compensation background check.  Yes  No
- (7) I understand that all offers of employment are conditional, based upon receipt of appropriate clearances through the DOJ/FBI, TB testing, agility testing, and the worker's compensation background check and the conditional offer may be rescinded if these clearances are not met.  Yes  No

*I hereby certify that all statements made hereon are true and correct to the best of my knowledge and authorize investigation of all statements made herein. I understand that applicants may be disqualified or dismissed for any false statement. I release from all liability persons and organizations providing information required by the process. The Kings County Office of Education reserves the right to disregard any application which is not fully complete and signed by the applicant.*

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

### PLEASE MAIL OR DELIVER YOUR COMPLETED APPLICATION TO:

Kings County Office of Education, Human Resources Department  
1144 W. Lacey Blvd., Hanford, CA 93230  
(559) 584-1441, [www.kings.k12.ca.us](http://www.kings.k12.ca.us)

#### Equal Opportunity Employer

KCOE is committed to ensuring equal, fair and meaningful access to employment and education services. KCOE does not discriminate in any employment practice, education program, or educational activity on the basis and/or association with a person or group with one or more of these actual or perceived characteristics of age, ancestry, color, disability, ethnicity, gender, gender identity or expression, genetic information, marital status, medical condition, national origin, political affiliation, pregnancy and related conditions, race, religion, retaliation, sex (including sexual harassment), sexual orientation, Vietnam Era Veterans' status, or any other basis prohibited by California state and federal nondiscrimination laws respectively.

## AUTHORIZATION TO RELEASE INFORMATION

It is the policy of the Kings County Office of Education to conduct reference checks for all candidates for employment. Reference checking is conducted after the interview portion of the selection procedure, and five references are normally obtained before the candidate is offered employment.

Your signature below indicates your agreement with and acknowledgement of the following:

As an applicant for an employment position with the Kings County Office of Education, I authorize my current and past employers and current and past work associates, including, but not limited to, supervisors, colleagues, and subordinates, to release to the Kings County Office of Education any reference and employment information in my personnel records or file (e.g., applications for employment, time/vacation records, performance evaluations), academic records (e.g., transcripts, certificates, credentials, etc.), and information related to my work and my work-related personal characteristics (e.g., my character, dependability, honesty, integrity, ability to work under pressure, interpersonal skills, general physical ability, if relevant to the job, and reputation among co-workers).

I expressly and without reservation waive my right to review the information collected in the reference checks.

The Kings County Office of Education will maintain reference information in strictest confidence and solely for the purposes of the recruitment of the position which I have applied. Information obtained during reference checks will not be provided to anyone outside the selection process.

A photocopy or a fax of this signed Authorization is to be considered valid as an original.

IN EXECUTING THIS AUTHORIZATION, I FULLY WAIVE ALL CLAIMS AND COMPLETELY RELEASE ALL PRESENT AND PAST EMPLOYERS AND THEIR EMPLOYEES, AND FORMER EMPLOYEES, THE KINGS COUNTY OFFICE OF EDUCATION AND ITS EMPLOYEES, AND ALL OTHER PERSONS AND ENTITIES FROM LIABILITY UNDER CALIFORNIA CIVIL CODE SECTIONS 45 AND 46 AND CALIFORNIA LABOR CODE SECTIONS 1050-1054, OR ANY SIMILAR LAWS OF OTHER STATES OR POLITICAL ENTITIES, WHICH MAY RESULT FROM FURNISHING INFORMATION WHICH I AM CONSENTING AND PERMITTING TO BE RELEASED BY WAY OF THIS AUTHORIZATION.

I HAVE CAREFULLY READ AND UNDERSTAND ALL OF THE PROVISIONS OF THIS AUTHORIZATION, AND HAVE VOLUNTARILY AND WITHOUT COERCION OR DURESS AGREED TO AND SIGNED THIS AUTHORIZATION IN COMPLIANCE WITH CIVIL CODE SECTION 1668 AS INTERPRETED BY THE COURTS. THIS RELEASE DOES NOT RELEASE CLAIMS AGAINST ANYONE BASED ON HIS/HER OWN FRAUD OR WILLFUL INJURY OR VIOLATION OF THE LAW TO THE EXTENT REQUIRED BY APPLICABLE LAW.

\_\_\_\_\_  
Candidate's Full Name (PRINT)

\_\_\_\_\_  
Other Last Names You Have Used (if any)

\_\_\_\_\_  
Candidate's Signature

\_\_\_\_\_  
Date

**Our Mission Is: To Provide Leadership – To Promote The Most Relevant Educational Program For Kings County Students**