



# Central Valley School District No. 356

19307 East Cataldo  
Spokane Valley, Washington 99016  
Office: (509) 228-5400  
FAX: (509) 228-5449  
Job Line: (509) 228-5447  
Website: www.cvsd.org

*An Equal Opportunity Employer*

## Classified Application for Employment

Please Type or Print Clearly

**Name** \_\_\_\_\_  
Last First Middle

**Present Address** \_\_\_\_\_ **Phone** \_\_\_\_\_  
City State Zip

**Business or Message Phone** \_\_\_\_\_

**Other name(s) under which records may be listed** \_\_\_\_\_

**Social Security Number** \_\_\_\_\_

### Prioritize Position(s) for which you are applying:

- |   |                                      |  |
|---|--------------------------------------|--|
| <input type="checkbox"/> Secretarial/Clerical | <input type="checkbox"/> Custodial   | <input type="checkbox"/> Educational Assistant |
| <input type="checkbox"/> Food Service         | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Supervisory Assistant |
| <input type="checkbox"/> Transportation       | <input type="checkbox"/> Other _____ |  |

**Present Position or Employment Status** \_\_\_\_\_  
Employer Position

Occasionally, a job application form makes it difficult for you to communicate as much information about yourself as you might like. To assist you in meeting this need, please respond to the following question:

### Why are you making this application?

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

### Citizenship

Would you be able to provide proof of citizenship, visa, or alien registration number if you were hired?  
 Yes  No

### Health

Do you have any health conditions which should be considered in job placement, or which may affect performance?

Yes  No If yes, please, explain \_\_\_\_\_

Check box if you are interested in a substitute position.

# Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1.	Employer	<b>Dates Employed</b>		Work Performed If full-time, mark with*	
		From	To		
	Address	Number of Years			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>			
	Job Title	Supervisor	Starting		Final
	Reason For Leaving	Number of Employees in Organization			
2.	Employer	<b>Dates Employed</b>		Work Performed If full-time, mark with*	
		From	To		
	Address	Number of Years			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>			
	Job Title	Supervisor	Starting		Final
	Reason For Leaving	Number of Employees in Organization			
3.	Employer	<b>Dates Employed</b>		Work Performed If full-time, mark with*	
		From	To		
	Address	Number of Years			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>			
	Job Title	Supervisor	Starting		Final
	Reason For Leaving	Number of Employees in Organization			
4.	Employer	<b>Dates Employed</b>		Work Performed If full-time, mark with*	
		From	To		
	Address	Number of Years			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>			
	Job Title	Supervisor	Starting		Final
	Reason For Leaving	Number of Employees in Organization			
5.	Employer	<b>Dates Employed</b>		Work Performed If full-time, mark with*	
		From	To		
	Address	Number of Years			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>			
	Job Title	Supervisor	Starting		Final
	Reason For Leaving	Number of Employees in Organization			

If you need additional space, please continue on a separate sheet of paper

## Education

	Elementary	High School	Vocational Training/School	Undergraduate College/University	Graduate Professional
School Name/Location					
Years Completed (Circle Last Year)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree & Year of Graduation					
Years Attended					
Describe Course of Study					
Extracurricular activities					
Describe any specialized training, apprenticeship, and/or skills					
Describe any honors you have received.					
State any additional information you feel may be helpful to us in considering your appli- cation					

## Activities

List professional, trade, business or civic activities and offices held. (You may exclude memberships which would reveal race, creed, color, national origin, sex, age, or disabilities.)

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## References

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

## Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

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Do you hold a current first aid card?  Yes  No

If not, have you had first aid training?  Yes  No If yes, when? \_\_\_\_\_

Do you have a valid Washington State driver's license?  Yes  No

What endorsements (other than passenger vehicle) do you have on your driver's license?

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Name, relationship, and position of relative(s) now working for the Central Valley School District:

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Are you a former school district employee?

Yes     No    If yes, give dates, position(s), \_\_\_\_\_  
and name of school district. \_\_\_\_\_

**Reminder**

> *Please use the following checklist as your guide to fulfilling the requirements for a complete application file.*

- \_\_\_\_\_ Completed application form
- \_\_\_\_\_ Current résumé
- \_\_\_\_\_ Applicant Disclosure Form
- \_\_\_\_\_ Request for Consideration Form — only if applying for a specific position(s)
- \_\_\_\_\_ Character Reference Forms from at least two persons — one from a previous supervisor preferred

I hereby certify that all the information I have provided in this application is true and correct. I give my permission for the Central Valley School District to contact any references or prior employers given in conjunction with this application. I recognize that falsification of any part of this application shall be sufficient cause for dismissal. References and personal information which become a part of this application will be regarded as confidential and shall not be revealed to me.

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Signature of Applicant

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Date

Applications will remain in active status through the end of the current school year unless renewed at the written request of the applicant.

**The Central Valley School District is An Equal Opportunity Employer.**

The Policy of the Central Valley School District shall be to select the best qualified applicant for a position as needed on the basis of bona fide occupational qualifications. The Central Valley School District complies with federal rules and regulations and Washington State statutes that prohibit discrimination based on gender, creed, race, national origin, age or disabilities in employment or participation in program or activities. Direct inquiries to: Compliance Officer, Central Valley School District No. 356, 19307 East Cataldo, Spokane Valley, WA 99016; or, telephone: (509) 228-5442.