

# Naselle-Grays River Valley School District No. 155

793 State Route 4  
Naselle, WA 98638  
(360) 484-7121 FAX (360) 484-3191

*AN EQUAL OPPORTUNITY EMPLOYER*

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## APPLICATION PROCEDURE FOR CERTIFICATED POSITION

We are pleased you are interested in applying for a position in the Naselle-grays River Valley School District. To be considered for any teaching position, complete the following steps:

- Complete the certificated application form, including all disclosure forms.
- Submit a letter of interest for each position for which you are applying. Employment opportunities can be accessed on our website [www.naselleschools.org](http://www.naselleschools.org).
- Submit at least 4 letters of recommendation with you application, resume, letter of interest and /or placement file.
- Please provide true, correct, and complete information. References and background information will be verified and an inquiry will be made to the Washington State Patrol and FBI.
- If applicable, have on file a completed form SPI 1588 (Washington State Sexual Misconduct Disclosure Release) for each current and past school district employer.
- To qualify for certain positions, you may be required to take job-specific tests.
- Include a copy of your teaching certificate and transcripts. Original transcripts will be necessary upon hire.
- If you are selected for an interview, the District Office will contact you to schedule your appointment for the interview.
- You will be notified of your status after a decision has been made following the interviews.

Questions regarding the application process should be directed to Human Resources or  
e-mail [rjacot@naselleschools.org](mailto:rjacot@naselleschools.org)

The Naselle-Grays River Valley School District does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity, disability, or the use of a trained dog guide or service animal and provides equal access to the Boy Scouts and other designated youth groups. The following employees have been designated to handle questions and complaints of alleged discrimination:

### **Title IX Coordinator**

Lisa Nelson, Supt.  
793 State Route 4  
Naselle, WA  
360.484.7121. Ext. 3  
[lnelson@naselleschools.org](mailto:lnelson@naselleschools.org)

### **Section 504/ADA Coordinator**

Justin Laine  
793 State Route 4  
Naselle, WA 98638  
360.484.7121 Ext. 1  
[jlaine@naselleschools.org](mailto:jlaine@naselleschools.org)

### **Civil Rights Compliance Coordinator**

Lisa Nelson, Supt.  
793 State Route 4  
Naselle, WA  
360.484.7121. Ext. 3  
[lnelson@naselleschools.org](mailto:lnelson@naselleschools.org)

# Naselle-Grays River Valley School District

793 State Route 4  
 Naselle, WA 98638  
 Ph (360) 484-7121 Fax (360) 484-3191  
 www.naselleschools.org

## APPLICATION FOR CERTIFICATED POSITION

**THIS FORM IS TO BE COMPLETED IN INK**  
 A letter of interest and other requested materials must also be completed and submitted by the closing date for each position for which you would like to apply.

Name \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Last                      First                      Middle

Address \_\_\_\_\_ Telephone \_\_\_\_\_  
Street                      City                      State/Zip

E-mail \_\_\_\_\_ Cell/Message \_\_\_\_\_

In Case of Emergency, Notify \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

EDUCATIONAL TRAINING					
SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE STUDY	CREDITS AWARDED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
High					
College					
College					
College					
College					

Naselle-Grays River Valley School District IS AN EQUAL OPPORTUNITY EMPLOYER	<b>OFFICE USE ONLY</b> References: _____ Bilingual: _____ Transcripts: _____ ETS: _____ Certificate: _____ BA: _____ Credits: _____ Masters: _____ Letters of Recommendation: _____ Doctorate: _____
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## EMPLOYMENT HISTORY

List all work experience (use supplemental page if necessary)

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer and explain any gaps in employment such as military, attending school, unemployed, etc. If employment was under a different name, please indicate.

<i>Employer</i>		<i>Employment Data</i>		<i>Title and Job Responsibilities</i>
1	Place of Employment	From Mo/Yr	To Mo/Yr	
	Street Address			
	City, State Zip Code	Hours Worked Per Week:		
	Type of Business	Salary Start:	Last:	Reason for Leaving:
	Supervisor and Telephone			
2	Place of Employment	From Mo/Yr	To Mo/Yr	
	Street Address			
	City, State Zip Code	Hours Worked Per Week:		
	Type of Business	Salary Start:	Last:	Reason for Leaving:
	Supervisor and Telephone			
3	Place of Employment	From Mo/Yr	To Mo/Yr	
	Street Address			
	City, State Zip Code	Hours Worked Per Week:		
	Type of Business	Salary Start:	Last:	Reason for Leaving:
	Supervisor and Telephone			
4	Place of Employment	From Mo/Yr	To Mo/Yr	
	Street Address			
	City, State Zip Code	Hours Worked Per Week:		
	Type of Business	Salary Start:	Last:	Reason for Leaving:
	Supervisor and Telephone			

### REFERENCES

List below three professional references who have known you during the past three years.

	NAME	ADDRESS	TELEPHONE	EMAIL
1				
2				
3				

**PERSONAL INFORMATION**

- 1. Have you ever worked for the District?  Yes  No  
 If yes, under what name? \_\_\_\_\_ Job title(s) \_\_\_\_\_  
 Dates and supervisor: \_\_\_\_\_
- 2. Are you legally eligible for employment in the United States?  Yes  No
- 3. Do you have relatives presently employed by the District?  Yes  No  
 If yes, please state name and relationship. \_\_\_\_\_
- 4. (a) Are you presently charged with, but not convicted of, a crime?  Yes  No  
*A pending criminal charge will not necessarily bar you from district employment. Exclude civil infractions such as minor traffic citations.*  
 If yes, please explain: \_\_\_\_\_  
 (b) Have you ever been convicted of a crime?  Yes  No  
 (The term "convicted" includes all adverse dispositions, including a finding of guilty, or nolo contendere, an Alford plea, a stipulation to facts, a deferred or suspended sentence, or a deferred prosecution.)  
*A conviction record will not necessarily bar you from district employment. Exclude civil infractions such as minor traffic citations.*  
 If yes, please explain: \_\_\_\_\_  
 (c) Have you ever been convicted, jailed, or released from prison for any offense that involves violence such as assault, rape, or child abuse; or any crime which involves drugs, alcohol, extortion, blackmail, coercion, embezzlement, fraud, theft or robbery?  Yes  No  
 If yes, please explain: \_\_\_\_\_
- 5. Do you have a valid Washington Driver's License, First Aid Card or CPR Card?  Yes  No  
 Which ones? \_\_\_\_\_ Expiration date(s) \_\_\_\_\_  
 If not, understanding that the ability to legally drive a motor vehicle or hold a valid First Aid Card or CPR Card is an essential job function of the position for which you have applied, are you willing to procure one if employment is offered?  Yes  No
- 6. Are you able to perform the essential functions of the job(s) for which you are applying with or without reasonable accommodations?  Yes  No

**APPLICATION PROCEDURES**

- 1. All applicants must provide a completed district application form, applicant disclosure forms, and at least four (4) letters of recommendation.
- 2. All interviews will be initiated and scheduled through the Human Resources Department/District Office.
- 3. Any person requiring special accommodations in the application process should advise the Human Resources Department.
- 4. When applicable, job skills and language competency testing will be scheduled by the Human Resources Department.
- 5. Former employers may be contacted by the district.
- 6. Offers of employment will be valid only if made by the Human Resources Department.
- 7. All offers of employment will be contingent upon Board approval.
- 8. If required for the position, any offer of employment will be contingent upon passing a drug screening and other testing to confirm bonafide occupation qualifications essential to the position.
- 9. Pursuant to Ch. 43 and 28A RCW and applicable laws, an inquiry to the Washington State Patrol and Federal Bureau of Investigation will be made. Employment will be on a conditional and temporary basis subject to satisfactory completion of the fingerprint screening and background check.
- 10. Application forms will be retained in the current file for one year following receipt and must be reactivated by written request within that year.

**CONDITIONS OF EMPLOYMENT:**

The applicant agrees to the following conditions of employment:

- 1. A pre-placement health evaluation, including drug testing, if required.
- 2. Meeting minimum or maximum age requirements of applicable laws and submitting proof of true age, if required.
- 3. Submitting proof of citizenship or U.S. work permit, W-4, Retirement data (date of birth, social security card), I-9 Employment Eligibility Verification and necessary documentation.
- 4. Completing and executing surety bond application, if required.
- 5. Meeting attendance and performance requirements.
- 6. Conforming to all District rules, regulations, instructions, and policies.

**Naselle-Grays River Valley School District – Signature release and authorization for reference checks.**

Applicant agrees that falsification of any part of this application shall be cause for dismissal.

All of the information I have provided in this application or supplement to it is true, correct and complete. I authorize Naselle-Grays River Valley to inquire with former employer(s) or references and obtain any and all information regarding my job related background. I release and waive the District, my former employer(s) and all references from any and all liability in obtaining or disclosing such information. I agree that if I have provided false or incomplete statements, the district may, at its sole discretion, without notice or due process procedures, terminate my employment contract. If such action is taken by the district, the contract shall be deemed void from its inception.

Signature of Applicant

Date

**NASELLE-GRAYS RIVER VALLEY SCHOOL DISTRICT NO. 155**

793 State Route 4  
Naselle, WA 98638

**APPLICANT DISCLOSURE**

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. These requests will be forwarded to the Washington State Patrol for disclosure of any applicable charges or findings. 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 RCW 43.43.830, and listed as follows: Aggravated murder; first, second or third degree murder; first or second degree kidnapping; first, second or third degree assault; first, second or third degree rape; first, second or third degree statutory rape; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second 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; child abuse or neglect as defined in RCW 26.44.020; first or second degree custodial interference; malicious harassment; first, second, or third degree child molestation; first or second degree sexual misconduct with a minor; patronizing a juvenile prostitute; 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; or any of these crimes as they may be renamed in the future?

ANSWER \_\_\_\_\_ IF YES, EXPLAIN BELOW

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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.

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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.

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4. Have you ever been found in any disciplinary board final decision to have sexually abused or exploited any minor or to have physically abused any minor?

ANSWER \_\_\_\_\_ IF YES, EXPLAIN BELOW.

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--OVER--

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.

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

Date \_\_\_\_\_ Place Signed \_\_\_\_\_

INVESTIGATION CONSENT AND RELEASE OF LIABILITY

I authorize the Naselle-Grays River Valley School District to make any investigation into my personal, educational, vocational, or employment history. I further authorize any former employer, person, firm, corporation, educational or vocational institution, or government agency to provide the Naselle-Grays River Valley School District with information from any and all liability as a result of furnishing this information. I realize that failure to provide accurate responses to questions on the application may result in non-hire or dismissal.

Signature \_\_\_\_\_ Date \_\_\_\_\_



# WASHINGTON STATE SEXUAL MISCONDUCT DISCLOSURE RELEASE

(District Submits This Form to Previous School District Employer(s))

<b>To:</b>	SCHOOL DISTRICT EMPLOYER	<input type="checkbox"/> No prior school district employment
	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 181-87 and WAC 181-88. Your assistance is appreciated.

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 below, 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 \_\_\_\_\_

**This section to be completed by former school district employer(s) only.**

- |   |  |
|---|--|
| <input type="checkbox"/> No sexual misconduct materials were found.   | Was a complaint of sexual misconduct filed with OSPI? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> Yes, sexual misconduct materials are available. Please contact for more information. |  |
| <input type="checkbox"/> No record of employment  |  |

Former Employer Representative Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Employing School Receipt Date \_\_\_\_\_ Received By \_\_\_\_\_

**Return all completed information to:**

SCHOOL DISTRICT		
Naselle-Grays River Valley School District - District Office		
ADDRESS		PHONE
793 State Route 4		360-484-7121 Ext. 3
STATE	ZIP	FAX
WA	98638	360-484-3191

FORM SPI 1588 (Rev. 6/07)

## NASELLE-GRAYS RIVER VALLEY SCHOOL DISTRICT NO. 155

### NOTICE TO EMPLOYEES DRUG-FREE WORKPLACE

You are hereby notified that it is a violation of Naselle-Grays River Valley School District No. 155 Board Policy 5201 for any employee to manufacture, distribute, dispense, possess or use in the workplace without a valid prescription any alcoholic beverage, narcotic drug, hallucinogenic drug, amphetamine, barbiturate, marijuana or any other controlled substance as defined in schedules I through V of Section 202 of the Controlled Substance Act (21 U.S.C. 812) and as further defined by regulation 21 CFR 1300.11 through 1308.15.

Workplace is defined as the site for the performance of work done in connection with Naselle-Grays River Valley School District No. 155 business, to include an Naselle School District owned motor vehicle.

You are further notified that it is a condition of your continued employment that you will comply with the above policy of Naselle-Grays River Valley School District and will notify your supervisor of your conviction under any criminal alcoholic beverage or drug statute for a violation occurring in the workplace. Such notification shall be no longer than five days after such conviction.

Any employee who violates the terms of the Naselle-Grays River Valley School District drug free workplace policy may be suspended, discharged, or nonrenewed in accordance with the provisions of the board policy and state law.

As a condition of eligibility for reinstatement or continued employment, an employee may be required to satisfactorily complete a drug/alcohol rehabilitation or treatment program approved by the superintendent or his designee at the employee's expense. Reinstatement or continued employment of an employee who has violated the drug free workplace policy is not guaranteed, nor does the Naselle-Grays River Valley School District incur any financial obligation for an employee's treatment or rehabilitation ordered as a condition of eligibility for reinstatement or continued employment.

**I have read and understand the drug-free workplace policy. I agree, as a condition of my employment, to abide by the terms of this program. I agree to notify Naselle-Grays River Valley School District of any criminal alcoholic beverage or drug statute conviction for a violation occurring in the workplace no later than five days after such conviction.**

\_\_\_\_\_  
Print Employee Name

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date