

**COAST UNIFIED SCHOOL DISTRICT**  
**APPLICATION FOR ADMINISTRATIVE POSITION**

Date of Application \_\_\_\_\_

**INSTRUCTIONS: Please fill out application, sign and date. In order that your application may be properly evaluated, it is essential that all of the following questions be answered carefully and completely.**

Position for which you are applying:

\_\_\_\_\_

=====

Name (please print): \_\_\_\_\_  
Last First Middle

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_ Area Code/Phone # \_\_\_\_\_

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**EDUCATION:**

Please list all educational institutions attended after high school. The information on all items below should be complete and accurate. The information is used as the preliminary basis for determining salary.

Name of Institution	Location: City/State	From	To	Graduate Units*:		Degree/Diploma	Major Subject(s)	Minor Subject(s)
				Sem	Qtr			

Number of **semester** units of graduate work beyond BA or BS degree \_\_\_\_\_ Number beyond MA or MS \_\_\_\_\_

**[1 Quarter Unit = 2/3 Semester Unit].**

\*Graduate work is defined as any work given by a college or university acceptable toward meeting requirements for an advanced degree or credential and taken after the degree is received. Transcripts of all college and university work are required before a warrant can be issued. List as either semester or quarter units, whichever is applicable.

- |  | YES | NO  |
|--|-----|-----|
| 1. Have you ever had any adverse action on your credential?  | ___ | ___ |
| 2. Has your credential ever been suspended or revoked?   | ___ | ___ |
| 3. Have you ever left a regular teaching position at any time other than at the end of the school year?  | ___ | ___ |
| 4. Have you ever been dismissed or asked to resign from any teaching position?   | ___ | ___ |
| 5. Do you have any physical condition which may limit your ability to perform teaching or related services?  | ___ | ___ |
| 6. Have you ever been convicted for any crime other than a minor traffic violation?  | ___ | ___ |
| 7. Have you ever been convicted of any felony or misdemeanor offense, including entering a plea of nolo contendere, in California or in any other state? (If yes, list section code _____) | ___ | ___ |
| 8. Do you have a pending felony or misdemeanor case?   | ___ | ___ |

(A conviction will not automatically bar you from consideration for employment. However, if you fail to disclose the fact of a conviction, that failure will result in disqualification from the employment process and/or immediate termination of employment. Ed Code prohibits hiring a person who has been convicted of a serious and violent misdemeanor, and felony criminal offenses and sex offenses as outlined in AB 1610/1612. Fingerprints are required by law of all school employees prior to hire, and will be reviewed by the Dept. Of Justice for criminal history clearance.)

**If you answered YES to any of the above questions, please attach a written statement explaining circumstances.**

**CALIFORNIA CREDENTIALS:** (If no present credentials, list type you expect to receive)

Type	Authorization Subject/Grades/Area	Expiration Date

**STUDENT TEACHING OR FIELD WORK:**

From	To	Subject/Grade/Level/Area	Name/Address/Phone # of Master/Cooperating Teacher	College or University	Hours: Semester	Quarter

**PAID CERTIFICATED EXPERIENCE:** (List most recent first - Indicate type: Regular, Substitute, Temporary)

Type	Dates: From	To	Title of Position Grades/Subjects	Name of School	District Name/Address	Name of Supervisor

**PLACEMENT PAPERS (complete if applicable):** My placement papers are on file at the following:

Placement Office Name: \_\_\_\_\_  
 Placement Office Address: \_\_\_\_\_  
 Under the name of: \_\_\_\_\_

**REFERENCES:** Provide below references including superintendents, principals or college advisors who have first-hand knowledge of your character, personality, scholarship and teaching ability.

Name	Official Position	Street Address/City/State	Work and Home Phone

**OTHER RELATED VOCATIONAL EXPERIENCES:**

Name of Employer	Address	Zip	Type of Work	Dates Employed

Please list other subjects which you are qualified to teach; activities to direct: \_\_\_\_\_  
 \_\_\_\_\_

I hereby certify that the information contained in this application is true to the best of my knowledge and belief and acknowledge that any misrepresentation may result in an invalid application, denial of interview, loss of offer of employment and dismissal if employed.

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