



BOARD OF EDUCATION

Zoe Carpenter
Joan Gardner
Marv Gilbert
Royce Moore
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SUPERINTENDENT

Jennifer Walters

OFFICE LOCATION

2310 Aldergrove Ave.
Escondido, CA 92029
Tel (760) 432-2400
Fax (760) 735-2881
www.eusd4kids.org

Dear Applicant:

Thank you for your interest in working for the Escondido Union School District! We are a growing district and are always pleased to have talented and qualified applicants to consider when vacancies or substitute teaching opportunities occur. The attached application is for certificated positions and/or substitute teaching.

We want you to know that our applicant tracking system allows us to consider each qualified applicant in accordance with positions or grade levels desired. Those most qualified for regular certificated positions will be contacted for interviews. Applicants selected for substitute teaching positions will be contacted by Human Resources.

When returning your completed application, it is requested that you also include **copies** of the following:

For Substitute Teaching:

- Credentials, or Substitute
- Permit
- CBEST Card
- Transcripts

For Teaching/Other Certificated:

- Credentials
- BCLAD, CLAD, or equivalent ELL certification
- CBEST Card
- RICA, MSAT, and/or CSET Results (if applicable)
- Transcripts
- Resume
- Letters of Recommendation
- No Child Left Behind Compliant Form (if applicable)

May I extend my best wishes to you as you pursue your profession.

Sincerely,

Robert J. Leon
Deputy Superintendent
Human Resources

BL/eb

Attachments

**ESCONDIDO UNION SCHOOL DISTRICT
APPLICATION FOR
CERTIFICATED PERSONNEL**

For District Office Use Only

Name (Please Print) _____ Other Last Names Used (if any) _____ Social Security Number _____

Street Address _____ Apartment or Unit Number _____

City, State, and Zip Code _____

() _____ () _____ () _____
Home Telephone Number Cell Phone Number Additional Contact Number

Date CBEST Passed _____ Date MSAT Passed _____ Date RICA Passed _____
Date CSET Passed _____ Other Subject Matter Exams Passed: In CA _____ Out-of-State _____
Military/Peace Corp. Service _____ Years Full-Time Teaching _____ In CA _____ Out-of-State _____
No Child Left Behind Compliant form? No _____ Yes _____ If Yes, subject area/s of compliance _____

**POSITION(S) APPLYING FOR
IN YOUR CREDENTIAL AREA:**

- Counselor Psychologist Reading Specialist Resource Specialist
 School Nurse Speech Therapist Preschool Other _____
 Teacher: ___ K-5 ___ 6-8 ___ Bilingual (Spanish fluency), ___ Special Education
 Subject(s) 6-8: _____
 Sub. Teacher: ___ K-5 ___ 6-8 ___ Bilingual (Spanish fluency), ___ Special Education
 Subject(s) 6-8: _____

Please List California Credentials, Out-of-State Credentials, or Substitute Permits Now Held or Applied For:

Type _____ Expires _____ Applied For
 Supplemental(s) _____
 Type _____ Expires _____ Applied For
 Supplemental(s) _____
 Type _____ Expires _____ Applied For
 Supplemental(s) _____

Majors on Credential _____ Minors on Credential _____

Do you hold a Bilingual Credential or Certificate (in CA)? Yes No In Progress Out-of-State? Yes No
 Do you hold English Language Learner Certification in CA? Yes No
 Do you hold English Language Learner Certification out-of-state? Yes No
 If yes to above, please specify _____

COLLEGE OR UNIVERSITY EDUCATION

Name	Major	Minor	Degree

How many semester units have you completed beyond your BA/BS? _____ Do you have a MA/MS? _____
 How many semester units have you completed beyond your MA/MS? _____

(NOTE: One quarter unit = 2/3 of a semester unit. To convert quarter units to semester units, multiply total quarter units by .667.)

Have you ever been non-reelected, dismissed, or asked to resign from any teaching position? Yes No If yes, please attach an explanation. Have you ever resigned in lieu of discipline, termination, or non-reelection? Yes No Has your credential ever been suspended or revoked? Yes No If yes, please attach an explanation.

TEACHING EXPERIENCE

Regular or Special Education Teaching While Under CONTRACT: (Do not include student or substitute teaching experience in this section)

From	To	Grade/Subjects	School	District	Address

Substitute Teaching: (Do not include student teaching experience in this section)

From	To	Grade/Subjects	School	District	Address

Student Teaching: (Do not include substitute teaching experience in this section)

Date Completed _____	In Progress <input type="checkbox"/>	Anticipated Date of Completion _____	From	To	Grade/Subjects	School	District	Address

Out-of-State Credentials Only: Was student teaching required for certification in your state? Yes No

<u>List Other Work Experience</u>	<u>Dates</u>

List **Three Professional References** (Include only those who have knowledge of and have supervised your teaching experience; i.e., Superintendent, Principals, Supervisors, and Student Teaching Master Teachers.)

Name	Position	Phone Number	Address

Are you a member of the California State Teacher's Retirement System (STRS)? Yes No

PLEASE ATTACH TO THIS APPLICATION AN ESSAY OF NO LESS THAN 250 WORDS OUTLINING YOUR BACKGROUND AND EXPERIENCE THAT IS SUPPORTIVE OF THIS APPLICATION.

I Understand and Agree:

- a. Before my contract becomes effective or compensation is possible, a valid California Credential appropriate to my assignment must be filed in the Office of the San Diego County Superintendent of Schools, San Diego, California.
- b. The Escondido Union School District keeps all applications on file for a period of one year from the date the application is received. I understand that if I am interested in a position with the district one year from the date I file this application, I must so notify the district. I understand that in the event the district does not receive such notification, my application will be destroyed.
- c. As part of this application, it is my responsibility to have my placement file forwarded to the Escondido Union School District.
- d. As part of the application procedure, a sample lesson plan may be required.
- e. Proper completion of this application will be part of the selection process.
- f. The Authorization to Release Information must be signed before my application will be considered.
- g. I hereby acknowledge that a misrepresentation or material omission on the application will be grounds for discharge.

Any Offer of Employment will be contingent upon completion of a medical questionnaire, participation in and passing a medical examination, including drug/alcohol testing, verification that you can perform the essential functions of the position, and fingerprint clearance for employment. The district will make reasonable accommodation for qualified individuals with disabilities as required by law.

I hereby certify that all statements made hereon are true and correct to the best of my knowledge, and authorize investigations of all statements herein recorded. I release from all liability persons and organizations reporting information required by this application.

Signature of Applicant

Date

AUTHORIZATION TO RELEASE INFORMATION

It is the policy of the Escondido Union School District to conduct reference checks for all candidates for employment. Reference checking may be conducted prior to or following the interview portion of the selection procedure, and three references are normally obtained.

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

- 1. As an applicant for a position with the District, I authorize my current and past employers and work associates, including, but not limited to, supervisors, colleagues, and subordinates, to release to the Escondido Union School District reference information in my personnel records or file (i.e. applications for employment, time and sick leave records, vacation records, performance evaluations), academic records (i.e. transcripts, certificates, credentials, etc.), and information related to my work-related personal characteristics (i.e. my character, dependability, honesty, integrity, ability to work under pressure, interpersonal skills, general physical ability, and reputation among co-workers).
- 2. I expressly and without reservation waive my right to review the information collected in the reference checks.
- 3. The Escondido Union School District will maintain reference information in strictest confidence and solely for the purpose of the recruitment for which I have applied, and that information obtained during reference checks will not be provided to anyone outside the selection process.
- 4. A photocopy of this signed Authorization is to be considered valid as an original.
- 5. In executing this Authorization, I fully and completely release all present and past employers and their employees, the Escondido Union School District and its employees, and all other persons and entities from liability for any damage, including, to the full extent allowed by law, liability under California Civil Code Sections 45 and 46 and California Labor Code Section 1054, or any similar laws of other states or political entities, which may result from furnishing information which I am permitting to be released by way of this authorization.
- 6. 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.

Full Name (Print)

Other Last Names You Have Used (If any).

Signature

Date

See back page for Bilingual Competency Supplement (Spanish language proficiency)

SUPPLEMENT FOR CANDIDATES WITH BILINGUAL COMPETENCIES

We are interested in your level of oral Spanish language proficiency in the areas of pronunciation, grammar, vocabulary, fluency, and comprehension.

1. Have you been rated in your proficiency through a university or specialized training institute? Yes No If yes, what is your current rating, and by whom? _____
2. If you do not hold a credential authorizing primary language instruction (other than English), please indicate what program you are enrolled in to pursue that authorization: _____
3. Describe university classes or other formal language training in which you have participated: _____

Please read the statements below and circle the statement in each category which best describes your skills as you know them:

	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	LEVEL 5
Pronunciation	Often unintelligible	Usually foreign but rarely unintelligible	Sometimes foreign but always intelligible	Sometimes foreign but always intelligible	
Grammar	Accuracy limited to set expressions; almost no control of syntax; often conveys wrong information	Fair control of most basic syntactic patterns; conveys meaning accurately in simple sentence most of the time	Good control of most basic syntactic patterns; always conveys meaning accurately in reasonable complex sentences	Makes only occasional errors, and these show no pattern of deficiency	Control equal to that of an educated native speaker
Vocabulary	Adequate only for survival, travel, and basic courtesy needs	Adequate for simple social conversation and routine job needs	Adequate for participation in all general conversation and for professional discussions in a special field	Professional and general vocabulary broad and precise, appropriate to every occasion	Speech at least as fluent and effortless as in English on all occasions
Fluency	Except for memorized expressions, every utterance requires enormous, obvious effort	Usually hesitant, often forced to silence by limitations of grammar and vocabulary	Rarely hesitant; always able to sustain conversation through circumlocutions	Speech on all professional matters as apparently effortless as in English; always easy to listen to	Equal to that of the native speaker
Comprehension	May require much repetition, slow rate of speech; understands only very simple, short familiar utterances	In general, understands non-technical speech but sometimes misinterprets or needs utterances reworded. Usually cannot follow conversation between native speakers.	Understands most of what is said; can follow speeches, clear radio broadcasts, and most conversation between native speakers, but not in great detail	Can understand all educated speech in any moderately clear context; occasionally baffled by colloquialisms and regionalisms	

I declare that I have provided, to the best of my knowledge, true and accurate information relative to my bilingual language skills. I understand that the Escondido Union School District hiring process includes evaluation of my oral and written Spanish skills.

Signature of Applicant

Date

*An Equal Opportunity Employer ♦ All Qualified Individuals are Encouraged to Apply
Return Completed Application to:*

**ESCONDIDO UNION SCHOOL DISTRICT
ATTN: HUMAN RESOURCES, CERTIFICATED PERSONNEL
2310 ALDERGROVE AVENUE
ESCONDIDO, CALIFORNIA 92029**

Telephone: (760) 432-2400

ESCONDIDO UNION SCHOOL DISTRICT
Human Resources, Certificated
2310 Aldergrove Avenue
Escondido, California 92029

CONVICTION REPORT

Position Sought

Last Name

First

Middle

Social Security #

Please read carefully:

The California Education Code (Sec. 45123) requires that we request the following information:

Have you ever been **convicted** of a sex, alcohol or drug-related charge? Yes ___ No ___

Are charges pending against you for a sex, alcohol or drug-related incident? Yes ___ No ___

Have you ever been convicted of any felony offense? Yes ___ No ___

Are there any criminal charges pending against you as of this date? **(Omit minor traffic violations.)**
Yes ___ No ___

If your answer is "Yes" to any of the questions above, please explain below. You may attach information to this form.

DATE	CHARGE	CODE SECTION	DISPOSITION (Results)	REMARKS

A conviction record **does not** automatically prevent you from submitting an application with the Escondido Union School District. However, failure to complete this form or to provide the requested information may disqualify you for an examination or cause your dismissal from employment. You may request an interview with Human Resources prior to completing this form.

Signature _____

Date _____

I certify that the above is true and further understand it will be subject to proper investigation

ESCONDIDO UNION SCHOOL DISTRICT

Position applied for: _____

Social Security No. _____

Current Employee
(Regular)

New Applicant

RECRUITMENT DATA SURVEY

This information helps us to determine which recruitment sources provide most of our applicants for a given job category. Please indicate, by checking the appropriate box, how you learned about this opening:

- Newspaper _____
- EUSD job bulletin at _____
(Location)
- CASBO job finder
- Referral from California Employment
Development Department (EDD)
- District Personnel Office
- Other District Employee
- Friend or Relative
- Other _____
(specify)

EQUAL EMPLOYMENT OPPORTUNITY SURVEY FORM

Federal law requires the District to maintain information by race, sex, and national origin (ethnic group) for record-keeping purposes in compliance with the law. State (Section 1233, California Government Code) and Federal laws permit this data to be obtained through voluntary self-identification. We ask your assistance in providing this necessary information, which will enable us to complete required reports and to monitor our applicant flow and selection process statistically.

A separate file will be established for these forms, and none of the information will be used to discriminate against or give preference to any individual in any personnel transaction.

BIRTHDATE ____/____/____

SEX ____ Male ____ Female

HANDICAPPED/DISABLED Yes No _____
(Indicate type and extent of handicap)

RACIAL/ETHNIC BACKGROUND: Check the one category below which best identifies your own racial/ethnic background (by ancestry, not marriage).

- BLACK, NON-HISPANIC
- HISPANIC
- WHITE, NON-HISPANIC
- AMERICAN INDIAN
- ASIAN
- FILIPINO