

**POSITION DESIRED:**

- \_\_\_\_\_ Secretarial
- \_\_\_\_\_ Maintenance/Custodial
- \_\_\_\_\_ Paraeducator (see required qualifications)
- \_\_\_\_\_ Transportation
- \_\_\_\_\_ Food Service
- \_\_\_\_\_ OTHER \_\_\_\_\_

**Goldendale School District No. 404**

604 East Brooks  
 Goldendale, WA 98620  
 (509) 773-5177  
[www.goldendaleschools.org](http://www.goldendaleschools.org)

**PERSONAL INFORMATION**

**NAME**

LAST

FIRST

MIDDLE

Other names known by: \_\_\_\_\_ Social Security # \_\_\_\_\_

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

Home Telephone \_\_\_\_\_ Business or Message Phone \_\_\_\_\_

Have you ever been convicted of a crime in the past ten years, excluding misdemeanor and summary offenses, which has not been annulled, expunged or sealed by a court?      \_\_\_ Yes \_\_\_ No (If yes, attach explanation.)

**EDUCATION & TRAINING:**

<u>NAME OF SCHOOL</u>	<u>LOCATION</u>	<u>CERTIFICATE EARNED</u>	<u>DATE EARNED</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**PERSONAL REFERENCES:**

List below three persons, other than relatives and former employers, who have known you during the past three years.

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE NO.</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby declare the information provided by me in this Application of Employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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*In accordance with Federal law, the Goldendale School District is prohibited from discriminating on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental or physical disability, or the use of trained dog guide or service animal by a person with a disability and provides access to the Boy Scouts of America and other designated youth groups. To file a complaint of discrimination, write to Clay Henry, Affirmative Action and Non-Discrimination Compliance Officer, Goldendale School District No. 404, 525 Simcoe Drive, Goldendale WA 98620 or call (509) 773-5846. Goldendale School District is an equal opportunity employer, complies with all Federal Rules and Regulations, and does not discriminate for all district employment opportunities.*

**THE GOLDENDALE SCHOOL DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER**

**GENERAL INFORMATION**

**(All applicants please answer)**

1. Have you ever worked for Goldendale School District?     \_\_\_ Yes     \_\_\_ No  
Job Title(s) \_\_\_\_\_
2. Do you have friends or relatives presently employed by Goldendale School District?     \_\_\_ Yes     \_\_\_ No  
Name(s) \_\_\_\_\_
3. Do you hold a current first aid card? \_\_\_\_\_ If not, have you ever had first aid training? \_\_\_\_\_  
How Recently? \_\_\_\_\_
4. What is your Washington State Driver's License Number? \_\_\_\_\_
5. Are you fluent in a language other than English? \_\_\_\_\_ Specify \_\_\_\_\_

**SECRETARIAL APPLICANTS ONLY**

Please list the number of years training and experience in the following:

	# of Years Training	# of Years Experience
Typing (_____ net wpm)	_____	_____
Shorthand(_____ net wpm)	_____	_____
Bookkeeping	_____	_____
Payroll	_____	_____
Data Processing	_____	_____
Word Processing	_____	_____
Office Machines (list those you operate)		
a. _____ b. _____	_____	_____
c. _____ d. _____	_____	_____

**PARAEDUCATOR APPLICANTS ONLY**

**Qualifications:** Paraeducator applicants must include with employment application an official transcript reflecting 72-college quarter credits earned or documentation of successful completion of the State of Washington Formal Paraeducator Assessment. A copy of the high school diploma must also be included with employment application.

**Please list the work experience you've had with children's groups:**

Approximate Date	Name and Location	Your	Size	
From     To	of Group	Position	of Group	Duties

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Can you type? \_\_\_\_\_ (\_\_\_\_\_ net wpm)     What office machines can you operate? \_\_\_\_\_

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**FOOD SERVICE APPLICANTS ONLY**

What cooking training and/or experience have you had? \_\_\_\_\_

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How large a group have you cooked for? \_\_\_\_\_

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What training and/or experience in record keeping have you had? \_\_\_\_\_

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Are you willing and able to lift up to 50 lbs? \_\_\_\_\_

**TRANSPORTATION APPLICANTS ONLY**

Please list all restrictions placed upon your driving as found on your driver's license \_\_\_\_\_

How many years have you been driving? \_\_\_\_\_ Have you ever had your license revoked? \_\_\_\_\_

Explain \_\_\_\_\_

What experience have you had in driving a truck or bus? Years \_\_\_\_\_ Miles \_\_\_\_\_

Do you have an intermediate or combination endorsement on your driver's license? \_\_\_\_ Yes \_\_\_\_ No

Are you willing to take out of town trips? \_\_\_\_\_ Overnight trips? \_\_\_\_\_

How many traffic citations have you received in the last three years? \_\_\_\_\_

Have you ever received a citation for: Drunk \_\_\_\_\_, Reckless \_\_\_\_\_, Negligent \_\_\_\_\_, Hit/Run \_\_\_\_\_

List any driver instruction courses you may have attended: \_\_\_\_\_

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

**MAINTENANCE/CUSTODIAL APPLICANTS ONLY**

Do you hold a journey person's card? If so, what trade? \_\_\_\_\_

Have you been an apprentice? If so, what trade? \_\_\_\_\_

**Please indicate the number of years training and experience in the appropriate categories:**

	<b>No. Years Training</b>	<b>No. Years Experience</b>		<b>No. Years Training</b>	<b>No. Years Experience</b>
<b>Custodial</b>			Drainage & Sewer		
Boilers	_____	_____	Grounds Care	_____	_____
Floors, Buffing/Waxing, Stripping	_____	_____	Landscaping	_____	_____
Sweeper	_____	_____	<b>Equipment Operation</b>	_____	_____
Window/Wall Care	_____	_____	Bulldozer	_____	_____
Carpeted Floor Care	_____	_____	Grader	_____	_____
Clean/Sanitize Toilet/Showers	_____	_____	Lift-Truck	_____	_____
<b>Maintenance</b>			Gang-Mower	_____	_____
Acoustical	_____	_____	<b>Mechanics</b>	_____	_____
Cabinet Work	_____	_____	Automotive	_____	_____
Carpentry	_____	_____	Truck/Heavy Duty	_____	_____
Concrete	_____	_____	Brakes	_____	_____
Floor Covering	_____	_____	Diesel	_____	_____
Hardware	_____	_____	Gas Engine	_____	_____
Painting	_____	_____	Lubrication	_____	_____
Plumbing & Heating	_____	_____	Motor Overhaul	_____	_____
Roofing	_____	_____	Rear Axle or 3 <sup>rd</sup> Member	_____	_____
Welding	_____	_____	Transmission	_____	_____
Refrigeration	_____	_____	Welding	_____	_____
Small Engine	_____	_____			

How many traffic citations for moving violations have you had in the past five (5) years? \_\_\_\_\_

**EMPLOYMENT PROCEDURES**

**NOTE: Due to large number of applications, we are unable to inform you of openings. It will be your responsibility to check with our office on openings.**

1. The applicant must provide a completed application form.
2. All interviews will be initiated and scheduled through the District Office or through the building principals or their designee.
3. A W-4 form must be completed within 24 hours after notification of employment.
4. Food Handling permit must be obtained within 7 days after notification of employment. (Cafeteria employees only.)
5. Application forms will be kept active for a period of one year following date of application.
6. The applicant understands that the Goldendale School District may contact former employers and references.
7. Verification of identity and United States work authorization and Washington State Patrol and Federal Bureau of Investigation Fingerprint process must be completed before employment commences.

**EMPLOYMENT HISTORY**

Employer \_\_\_\_\_ Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

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Employer \_\_\_\_\_ Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

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Employer \_\_\_\_\_ Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

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Employer \_\_\_\_\_ Address \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_  
Specific Duties \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

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