**North River SCHOOL DISTRICT #200**

**2867 North River Rd., Cosmopolis, WA 98537**  (360) 532-3079

 FAX (360) 532-1738

**Application for Classified Employment**

|  |  |
| --- | --- |
| Last Name, First, Middle: | Date of Application: |
| Current Address: | Social Security No: |
| City State Zip | Are you under the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_ |
| Telephone No: Message Phone: | Are you legally authorized to workin the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_ |

Check the position(s) for which you are applying:

 \_\_\_\_\_ Para-educator \_\_\_\_\_ Transportation

 \_\_\_\_\_ Secretarial/Clerical/Office \_\_\_\_\_ Custodial

 \_\_\_\_\_ Food Service \_\_\_\_\_ Maintenance

 \_\_\_\_\_ Extra-curricular (coach/advisor) \_\_\_\_\_ Other

 Specify Activity/Sport \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Specific position \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Check the type of employment you prefer: \_\_\_\_\_ 12 months \_\_\_\_\_ 9 months \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Substitute

General Information and Instructions:

1. A completed application form is required for all candidates for employment. If employed, the application form will become a part of the permanent employment record.

2. Applications are kept active for one calendar year (January-December). Renewal of applications will be made upon the request of the applicant. Applications will be destroyed after one year unless renewed.

3. A completed application must be received by the District prior to the closing dates on job posting announcements.

4. Present or past employers will be contacted for references as part of the selection process.

5. Contact the Office at (360) 532-3079 if you have any questions regarding your application.

Federal and/or state criminal history fingerprinting background checks will be required of candidates who will or may have unsupervised access to children or to persons with developmental disabilities. Any offer of employment is conditional and subject to an acceptable outcome of a criminal history background check.

Any offer of employment for a position which requires a commercial driver’s license, including but not limited to school bus driver, is conditional and subject to an acceptable outcome of a drug test.

In accordance with the Immigration and Reform Control Act the North River School District will employ only persons legally authorized to work in the United States. Employment is conditional on providing proof of eligibility within three (3) days of employment.

I have read and understand the above statements.

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

 Signature Date

Equal Opportunity Employer

**For Office Use Only**

WSP Clearance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Substitute Board Hire Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FBI Clearance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Beginning Board Hire Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education and Training**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of School: | Location: | Dates Attended | Diploma |
| High School |  |  |  |
| College/University |  |  |  |
| College/University |  |  |  |
| Technical/Vocational |  |  |  |

|  |
| --- |
| Professional License or Certificate:  |
| Describe any special training or skills: |

|  |
| --- |
| U.S. Military Record:Branch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates of Service:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Type of Discharge:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Special type of training: |

**Professional References:**

|  |  |
| --- | --- |
| Name: | Phone No.: |
| Position Title: | Company Name: |
| Name: | Phone No.: |
| Position Title: | Company Name: |
| Name: | Phone No.: |
| Position Title: | Company Name: |

Have you previously been employed by the North River School District? \_\_\_\_\_\_\_\_\_\_

If yes, give dates and position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been dismissed from a position in the last ten years? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been asked to resign from a position? \_\_\_\_\_ Yes \_\_\_\_\_\_ No

Have you ever had your driver’s license suspended or revoked? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you answered yes to any of the above questions, please explain. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Work Experience**

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| --- |
| Current or Most Recent Position: |
| Your Job Title | Date Employed--Give Month and YearFrom To |
| Employer Type of Business | Hourly or Annual PayStart End |
| Address | Supervisor’s Phone Number( ) |
| Name and Title of Immediate Supervisor | May we contact your supervisor for reference?\_\_\_\_\_ Yes \_\_\_\_\_ No |
| Description of Duties |  |
|  |  |
|  |  |
| Reason for seeking other employment |  |

|  |
| --- |
| Previous Position: |
| Your Job Title | Date Employed--Give Month and YearFrom To |
| Employer Type of Business | Hourly or Annual PayStart End |
| Address | Supervisor’s Phone Number( ) |
| Name and Title of Immediate Supervisor | May we contact your supervisor for reference?\_\_\_\_\_ Yes \_\_\_\_\_ No |
| Description of Duties |  |
|  |  |
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| Reason for seeking other employment |  |

|  |
| --- |
| Previous Position: |
| Your Job Title | Date Employed--Give Month and YearFrom To |
| Employer Type of Business | Hourly or Annual PayStart End |
| Address | Supervisor’s Phone Number( ) |
| Name and Title of Immediate Supervisor | May we contact your supervisor for reference?\_\_\_\_\_ Yes \_\_\_\_\_ No |
| Description of Duties |  |
|  |  |
|  |  |
| Reason for seeking other employment |  |

**Applicant Disclosure Form**

**Pursuant to Chapter 43.43 RCW**

Answer **YES** or **NO** to each listed item. If the answer is **YES** to any item, explain in the area provided, indicate the charge or finding, the date, and the court(s) involved. If you do not understand the following questions or if you are uncertain as to your answer to those questions, do not complete this form until such time as you are certain as to your response.

1. Have you ever been convicted of any crimes against persons as defined in Section 43.43 RCW and listed as follows: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree assault of a child; first or second degree rape; first, second or third degree rape of a child; 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 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?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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2. Have you been convicted of crimes relating to financial exploitation if the victim was a vulnerable adult as defined in Chapter 43.43.830(6) RCW amended, and listed as follows: first, second, or third degree theft; first or second degree robbery; forgery; or any of these crimes as they may be renamed in the future?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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3. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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4. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually assaulted or exploited any minor or to have physically abused any minor?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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5. Have you ever been found in any disciplinary board final decision to have sexually or physically abused any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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6. Have you ever been found by a court in a protection proceeding under Chapter 74.34 RCW to have abused or financially exploited a vulnerable adult?

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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7. Have you ever been convicted, fined, imprisoned or placed on probation of any crime for any violation of any law? For the purposes of this question, the term “convicted” means and includes: (1) all instances in which a plea of guilty or nolo contendere is the basis for the conviction and (2) all proceedings in which a charge has been deferred from prosecution or the sentence has been suspended or deferred. A conviction does not necessarily exclude you from employment.

\_\_\_\_\_ Yes \_\_\_\_\_ No. If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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. I authorize the North River School District #200 to inquire of former employers, supervisors, peers and references and to obtain any and all information regarding my job related background. I release and discharge the North River School District #200 and its agents, and all individuals inquired of as a result of this application from any and all liability in obtaining or disclosing such information. I agree that if I have provided false, misleading or incomplete information, the District may, at its sole discretion, without notice or due process procedures, terminate my employment. If such action is taken by the District, it is agreed that any employment contract deemed to exist shall be void from its inception.

Name (please print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NORTH RIVER SCHOOL DISTRICT #200**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last name (please print) First name

Discrimination in the North River School District is prohibited under Title VII of the Civil Rights Act of 1964 and by RCW 49.60 which prohibits discrimination on the basis of race, creed, color, national origin, age, sex, marital status, or the presence of a physical, sensory or mental handicap. Recognizing the legal as well as social obligation to make equal employment opportunity a reality, the above named school district has implemented an Affirmative Action Program. The goal of this program is proportionate representation of the entire community at all levels of the school district's programs.

For the purpose of effectively implementing the Affirmative Action Plans, we would appreciate you providing the information below. **This is entirely voluntary and will remain confidential**. This information will not be filed with or made part of your application.

Please check the correct items in each of the following categories:

**SEX ETHNIC**

\_\_\_\_\_ **Male** \_\_\_\_\_ **Asian or Pacific Islander**

 A person with origins in any of the original

\_\_\_\_\_ **Female** people of the Far East, Southeast Asia, the

 Indian Subcontinent or the Pacific Islands.

 This area includes China, Japan, Korea,

**OTHER PROTECTED GROUPS** the Philippine Republic and Samoa.

\_\_\_\_\_ **Vietnam Era Veteran** \_\_\_\_\_ **Black (Non-Hispanic)**

 I am a veteran of the Vietnam era; A person with origins in any of the black

 i.e., I served on active duty for more racial groups of Africa who is also not of

 than 180 days, some part of which Hispanic origin.

 occurred between August 5, 1964

 and May 7, 1975, and I was \_\_\_\_\_ **Native American or Alaskan Native**

 discharged with other than a A person with origins in any of the original

 dishonorable discharge; or I was people of North America and who maintains

 discharged or released from active cultural identification through tribal affiliation

 duty for a service-connected or community recognition.

 disability during the same period.

 \_\_\_\_\_ **Hispanic/Latino**

\_\_\_\_\_ **Disabled Veteran** A person of Mexican, Puerto Rican, Cuban,

 I am a disabled veteran; i.e., I am South American or other Spanish culture

 entitled to disability compensation or origin regardless of race.

 under the laws administered by the

 Veterans Administration for a \_\_\_\_\_ **White (Non-Hispanic)**

 disability rated at 30% or more, or I A person with origins in any of the original

 was discharged or released from people of Europe, North Africa or the Middle

 active duty for a disability incurred East who is not of Hispanic origin.

 or aggravated in the line of duty.

 \_\_\_\_\_ **Other**

**\_\_\_\_\_ A person 40 or over \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_ **Disabled**

 (As per Section 504) CLAS.

|  |
| --- |
|  **School District Work History Form****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Applicant’s Name Date****Washington State law requires additional safeguards in the hiring of school district employees to ensure the safety of Washington’s school children. In order for the North River School District to be in compliance with this law, you must complete this form. (If more space is required, please attach an additional sheet of paper.)****ٱ YES ٱ NO I am currently employed by or have been employed by a school district. If yes, please list all the school districts for which you have worked.****School District Name City State****School District Name City State****School District Name City State****School District Name City State****School District Name City State****Applicants may be hired on a conditional basis pending review of information obtained from former school district employers and similar information from the Superintendent of Public Instruction and other sources. Therefore, any hiring decision is not final or binding upon the District until any such required steps are completed and any questions are resolved.** **Your dated signature below signifies that the foregoing is true and correct.****\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Applicant’s Signature Date Signed** |
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| --- | --- |
|  |  OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION Office of Professional Practices Old Capitol Building PO BOX 47200  Olympia WA 98504-7200 **WASHINGTON STATE SEXUAL MISCONDUCT** **DISCLOSURE RELEASE** |

|  |  |
| --- | --- |
| **To:** | SCHOOL DISTRICT EMPLOYER      |
| 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 180-87 and WAC 180-88. Your assistance is appreciated.

|  |  |
| --- | --- |
| **Return all completed information to:** | SCHOOL DISTRICTNorth River School District, ATTN: District Office |
|  | ADDRESS2867 North River Rd. Cosmopolis, WA 98537 |
|  | PHONE360-532-3079 | FAX360-533-1738 |

Employing School Receipt Date       Recipient Name

|  |
| --- |
| 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 above, 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

|  |
| --- |
|  [ ]  No sexual misconduct materials were found. Complaint of sexual misconduct  [ ]  Yes, sexual misconduct materials are available. was filed with OSPI. [ ]  Yes [ ]  No Please contact for more information.  [ ]  No record of employment.  Former Employer Representative Signature Title Date  |

North River 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 guide dog 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/or complaints of alleged discrimination:

**Civil Rights Coordinator**, Superintendent Lindsey Maehlum, ppratt@nr.k12.wa.us

**Section 504 Coordinator,** Debbie Koehn, ppratt@nr.k12.wa.us

**Title IX Coordinator**, Sean Pierson, spierson@nr.k12.wa.us

All above named persons may also be reached by phone, (360)532-3079 or by appointment, at 2867 North River Rd, Cosmopolis, WA 98537.

The North River School District will also take steps to assure that national origin persons who lack English language skills can participate in all education programs, services, and activities. For information regarding translation services or transitional bilingual education programs, contact the language specialist, David Pickering, at 360.532.3079. ppratt@nr.k12.wa.us

**Compliance for State Law** RCW 28A.640/28A.42; WAC 392-190-060—Superintendent, Lindsey Maehlum, 360.532.3079 ppratt@nr.k12.wa.us