

# SUNDALE UNION ELEMENTARY SCHOOL DISTRICT

CINDY GIST  
SUPERINTENDENT

JOY FARKAS  
PRINCIPAL

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13990 AVENUE 240 • TULARE, CA 93274  
PHONE (559) 688-7451 • FAX (559) 688-5905

**"Committed to Academic Excellence"**

SCHOOL BOARD

SETH BROWN

GREG FERNANDES

JUDY JAMESON

RALPH WALTON

JOHANNA WEERHEIM

## Classified Application

Date: \_\_\_\_\_ Position(s) applying for: \_\_\_\_\_

Dates/Times Available for Interview: \_\_\_\_\_

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

## Education and Skills

|  | High School                                     | College/University   |               |
|--|---|--|---------------|
| Name of School/College   |   |  | Units Earned: |
| Diplomas/Degrees Completed   | Diploma/GED Completed: <input type="checkbox"/> | Degree Completed: <input type="checkbox"/><br>Degree Type/Major: _____ |               |
| Describe any specialized skills or trainings and list certificates held. |   |  |               |

|   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| Federal law requires proof of legal right to work in the United States. Can you, after employment, submit verification of your legal right to work in the United States?  | <input type="checkbox"/> | <input type="checkbox"/> |
| State law requires a criminal record check for all public school employees. A criminal record may, but will not necessarily disqualify an applicant from employment. Do you have any criminal convictions? If yes, please attach a note of explanation. | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever been dismissed or asked to resign from any employment? If yes, please attach a note of explanation.   | <input type="checkbox"/> | <input type="checkbox"/> |
| For references purposes, do we have your consent to contact any or all of the references and employers you listed on this application? List exceptions, if any:   | <input type="checkbox"/> | <input type="checkbox"/> |

## Employment-Related References

List previous employers we may contact.

| Name of Reference | Business/Organization | City, State | Phone Number |
|-------------------|-----------------------|-------------|--------------|
| 1.                |                       |             |              |
| 2.                |                       |             |              |
| 3.                |                       |             |              |

## Employment History

Show your current or most recent employer first. Show all employment from the past 10 years. Attach additional sheets if needed. A resume may be attached, but not in lieu of completing this section of the application.

|  |                         |   |
|--|-------------------------|---|
| Current or most recent employer:                                 | City, State:            | Phone Number:   |
| Employment Dates (month/year):<br>From:                      To: | Title of your position: | <input type="checkbox"/> Full-time (40 hours/week)<br><input type="checkbox"/> Part-time (_____ hours/week)<br><input type="checkbox"/> Seasonal/Temporary<br><input type="checkbox"/> On call/Substitute |
| Supervisor's name and position:                                  |                         |   |
| Major responsibilities:  |                         |   |
| Reason for leaving:  |                         |   |

|  |                         |   |
|--|-------------------------|---|
| Employer:  | City, State:            | Phone Number:   |
| Employment Dates (month/year):<br>From:                      To: | Title of your position: | <input type="checkbox"/> Full-time (40 hours/week)<br><input type="checkbox"/> Part-time (_____ hours/week)<br><input type="checkbox"/> Seasonal/Temporary<br><input type="checkbox"/> On call/Substitute |
| Supervisor's name and position:                                  |                         |   |
| Major responsibilities:  |                         |   |
| Reason for leaving:  |                         |   |

|  |                         |   |
|--|-------------------------|---|
| Employer:  | City, State:            | Phone Number:   |
| Employment Dates (month/year):<br>From:                      To: | Title of your position: | <input type="checkbox"/> Full-time (40 hours/week)<br><input type="checkbox"/> Part-time (_____ hours/week)<br><input type="checkbox"/> Seasonal/Temporary<br><input type="checkbox"/> On call/Substitute |
| Supervisor's name and position:                                  |                         |   |
| Major responsibilities:  |                         |   |
| Reason for leaving:  |                         |   |

Sundale Union Elementary School District is an equal opportunity employer. This school district does not discriminate on the basis of the person's actual or perceived race, religious creed, color, national origin, ancestry, age, marital status, pregnancy, physical or mental disability, medical condition, genetic information, military or veteran status, gender, gender identity, gender expression, sex, or sexual orientation. No person shall be denied employment solely because of any impairment which is unrelated to the ability to perform the essential functions of the position for which application has been made.

My signature below authorizes the Sundale Union Elementary School District to conduct a background investigation and authorizes release of information in connection with my application for employment. This investigation may include requesting information of criminal or civil convictions, driving records, present employer, previous employers, professional references, and other appropriate sources. I waive my right of access to any such information, and without limitation hereby release the school district and the reference sources from any liability in connection with release or use of such information.

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they will be relied upon in considering my employment, and I understand that any false statement, misrepresentation, or omission of material facts on this application, or any supplement to it, will be sufficient grounds for my rejection for employment, or for discharge should I become employed with the Sundale Union Elementary School District.

Applicant's name (please print): \_\_\_\_\_

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit the completed application and all supporting documents to:

Sundale Union Elementary School District

Katie Luis, Chief of Business & HR

13990 Avenue 240, Tulare, CA 93274

Phone: 559-688-7451

Fax: 559-688-5905

Email: [katie.luis@sundale.org](mailto:katie.luis@sundale.org)