

email address

COACH APPLICATION
BIG OAK FLAT-GROVELAND UNIFIED SCHOOL DISTRICT
 P. O. Box 1397 Groveland, CA 95321
 (209) 962-5765

Name _____
 Last _____ First _____ Middle _____
 Date of Application _____
 Other name(s) _____

Present Address _____
 Street _____ City _____ State _____ Zip _____

Permanent Address _____
 Street _____ City _____ State _____ Zip _____

Telephone _____
 (Area Code) Home _____ (Area Code) Business _____
 City _____ State _____ Zip _____
 Social Security # _____

State Teachers' Retirement System (STRS) Member? Yes No Withdrawn

California credential(s) now held: Type _____ Expires _____
 Type _____ Expires _____

California credential applied for: _____
 Expires _____

POSITION

Position(s) for which you are applying (according to preference) (1) _____ (2) _____
 Full Time _____ Substitute _____

Has your credential ever been suspended or revoked? Yes _____ No _____
 Have you ever been dismissed, or asked to resign, from any teaching position? Yes _____ No _____
 Have you every been convicted for anything other than a minor traffic violation? Yes _____ No _____
 For each question answered yes, explain the circumstances in writing and attach the statement to this form.

Education

YEARS FROM	TO	NAME OF COLLEGE OR UNIVERSITY	LOCATION	MAJOR	MINOR	DEGREE	DATE

Number of semester units of graduate work beyond BA or BS degree _____ Number beyond MA or MS _____
 One (1) quarter unit = Two thirds (2/3) semester unit.
 Have you passed the California Basic Education Skills Test (CBEST)? Yes _____ No _____ Not Necessary _____ Will take CBEST test / /

COACHING EXPERIENCE

(List all applicable experience, beginning with current or last position; include student and substitute teaching)

YEARS FROM	TO	SCHOOL AND DISTRICT	CITY AND STATE	GRADE SUBJECT/POSITION	REASON FOR LEAVING	HIGHEST SALARY

Are you now under contract? Yes _____ No _____ If yes, date of expiration _____ Total years of full time teaching experience _____

WORK EXPERIENCE (Include service in Armed Forces of U.S.)

YEARS FROM	TO	BUSINESS	CITY AND STATE	TYPE OF WORK

REFERENCES Other than those listed in your placement file. Include only those who have knowledge of your teaching experience; e.g., superintendents, principals, supervisors.

NAME	POSITION	ADDRESS	TELEPHONE

If a placement file is not readily available, the District will accept 3 current letters of recommendation, a resumé, and a letter of interest.

I certify that all statements made hereon are true and correct to the best of my knowledge. I understand that any false statements made on this application may be cause for non-employment or for dismissal, if employed.

I hereby authorize investigation of all statements herein recorded. I release from liability persons and organizations reporting information required by this application.

Driver's License Number _____

Signature of Applicant _____

Date _____