

6. Work experience **other than teaching**:

From	To:	Type of work	Employer name	Employer address

7. Educational and Professional Training:

Institution	Address	Attend from:	Attend to:	Date Graduated	Degree Graduated	Major(s)	Minor(s)

Number of semester units of upper division/graduate work completed after receipt of BA or BS degree: _____
 (1 quarter unit = 2/3 semester unit)

8. Professional references if not included in placement papers. (Include only those who have knowledge of your teaching experience: e.g., superintendents, principals, supervisors, and student teacher master teachers.)

Name	Position	Address

I HEREBY CERTIFY that all statements made in my application for employment with the Mark West Union School District, to the best of my knowledge, are true, accurate, and complete. Any misrepresentations or willful omissions of fact shall be sufficient cause for disqualification of this application or termination of employment. Furthermore, it is understood that this application and records become the property of the district which reserves the right to accept or reject it.

_____ Date available for employment

_____ Signature of Applicant

_____ Date

Applicants are considered for all positions without regard to race, ethnic group, color, religion, sex, national origin, age, marital or veteran status, sexual orientation, or physical or mental disability, Section 504 disability, or any other unlawful consideration.