



TRI-VALLEY REGIONAL OCCUPATIONAL PROGRAM HUMAN RESOURCES DIVISION

2600 KITTY HAWK RD., #117
LIVERMORE, CA 94551-9699

PH (925) 455-4800
FAX (925) 449-9126

APPLICATION FOR CERTIFICATED EMPLOYMENT

Submit the following items with your application

- letter of interest
- resumé
- three letters of reference dated within the last year
- copy of your credential (if available)

Your application will be screened when all items have been submitted.

Date: _____

Name _____ Last First Middle			SSN _____
Address _____ Street Apt. #			Phone (h) _____
City State Zip			Phone (w) _____
Email address: _____			Date available for employment _____

Position you are applying for: _____

CA credential(s) now held: 1. _____ Expires: _____
 2. _____ Expires: _____
 If not credentialed, have you applied for one: ___ Yes ___ No
 What type: _____ Date of application: _____

- YES ___ NO ___ 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 ever been convicted for anything other than a minor traffic violation?

For each question above answered yes, explain in writing the circumstances and attach the statement to this form.

- YES ___ NO ___ Are you a member of the State Teacher's Retirement System? *If you have withdrawn funds, you are no longer a member.*
 YES ___ NO ___ If hired, can you submit verification of your legal right to work in the United States?
 YES ___ NO ___ Do you have verification of a TB Test within the past 3 years? If not, one will be required before employment with Tri-Valley ROP.
 YES ___ NO ___ Do you have CLAD Certification or ELD/SDAIE Certification? Currently enrolled? _____

Languages other than English you are proficient in:	Speak?	Read?	Write?

WE ARE AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

COLLEGE / UNIVERSITY EDUCATION

(list most current institution first)

Name and Location of School	Attended		Graduated		Major	Minor
		To	Date	Degree		

TEACHING EXPERIENCE

(list most current position first)

Dates		Grades / Subjects	School	District	District Address
From	To				

WORK EXPERIENCE (IN RELATED INDUSTRY)

(list most current position first.)

Dates (mm/yy)	Employer	Position	Address	Phone

PROFESSIONAL REFERENCES (MINIMUM of three)

Name	Position	Address	Phone

If you are scheduled for an interview, a letter from your LEA verifying qualification for a credential will be required. According to Section 44332.6 of the Education Code, before employment with Tri-Valley ROP, you are required to be fingerprinted.

I hereby certify that all foregoing statements are true and correct to the best of my knowledge. My signature below authorizes Tri-Valley ROP to check my references and investigate all statements herein recorded. I release from all liability persons and organizations reporting information required by this application. I understand that any omission or false statement made by me on this application, or any supplement to it, will be sufficient grounds for failure to employ or for my discharge should I become employed with Tri-Valley ROP.

Applicant's signature _____ Date _____