

ANTELOPE VALLEY UNION HIGH SCHOOL DISTRICT
44811 SIERRA HIGHWAY LANCASTER CALIFORNIA 93534 (661) 948-7655
www.avdistrict.org



CERTIFICATED EMPLOYMENT APPLICATION

(Applicant: you may keep this informational page)

Please complete and return the district Application Form together with the items listed below in order to be considered for a certificated position with the Antelope Valley Union High School District. All candidates *must* provide the following items to be considered for certificated positions:

- Completed and signed AVUHSD Application Form**
- Chronological resume (resume must reflect all periods of work, non-work, college attendance, etc)**
- College/University Placement File or three (3) recent letters of reference. One (1) letter of reference is required for substitute teaching applicants**
- Copies of transcripts verifying degrees**
- Copies of California or out-of-state teaching or service credential(s) appropriate to the position**
- Verification of passing the Basic Skills Exam.**

The application of all candidates will be held in strict confidence. All applications will be carefully screened. A district representative may contact previous and/or current employers to gather information regarding performance.

Your application will be placed in our applicant tracking system. The application will remain on file until December 1st of each year. You must advise the Personnel Office prior to November 30th if you wish your application packet to remain active for the following year.

Thank you for your interest in a position with the Antelope Valley Union High School District.

Mark Bryant,
Assistant Superintendent Personnel Services

The Antelope Valley Union High School District Governing Board prohibits unlawful discrimination against and/or harassment of district employees and job applicants on the basis of race, color, national origin, ancestry, religious creed, age, marital status, pregnancy, physical or mental disability, medical condition, veteran status, gender, and actual or perceived sexual orientation, or any other unlawful consideration.

EQUAL OPPORTUNITY EMPLOYER

Please note that specific programs and subject areas will require varied duties, responsibilities, qualifications, physical abilities, and other certifications than those listed. This description is offered strictly as a generic guideline to the basic duties of a classroom teacher.

Brief Description of Position: Teaches one or more classes of designated subject to students in grades 9-12 and assists in other school programs as assigned.

Major Duties and Responsibilities:

Teaches content and skills in designated subject to secondary students, utilizing the course of study adopted by the Board of Education. Instructs students in citizenship, basic communication skills, and other general elements of the course of study common to all teachers, as specified in state law and administrative regulations and procedures of the school district. Adapts designated subject material and methods to develop relevant sequential assignments that guide and challenge students. Develops lesson plans and supplementary materials compatible with the basic instructional philosophy. Encourages students to think independently and to express original ideas. Provides individualized and small group instruction where necessary in order to adapt the curriculum to the needs of each student. Evaluates each student's progress in designated subject and prepares progress reports. Establishes and maintains standards of student behavior needed to provide an organized, productive classroom environment. Maintains professional competence through participation in inservice educational activities provided by the district and/or self-selected professional growth activities. Performs basic attendance, accounting, business services, and requisitions as required. Strives toward the accomplishment of District adopted goals and objectives.

Other Duties and Responsibilities:

Identifies student needs, and cooperates with other professional staff members in assessing and helping students solve health, attitude, and learning problems. Communicates with parents and school counselors on the individual student's progress. Participates in curriculum and other developmental programs within the school of assignment and/or on a district level. Shares in the sponsorship of student activities and participates in faculty committees on a voluntary basis.

Supervision Exercised or Received:

Supervises, plans, and coordinates the work of aides, classified personnel, assistants, and other paraprofessionals. Receives supervision pursuant to the evaluation proceedings.

Minimum Qualifications:

Credential: Single Subject in area of specialization.

Education: Bachelor's degree with major or minor in designated subject, including all courses needed to meet credential requirements. Must pass the BASIC SKILLS EXAM.

Experience: Completion of teacher's preparation program and student teaching.

Personal Qualifications: Ability to meet state standards of physical and mental health.

Physical Abilities:

Visual ability to read handwritten or typed documents, and the display screen of various office equipment and machines. Able to conduct verbal conversation. Able to hear normal range verbal conversation (approximately 60 decibels). Able to sit, stand, stoop, kneel, bend and walk. Able to sit for sustained periods of time. Able to climb slopes, stairs, steps, ramps and ladders. Able to *lift* up to 30 pounds frequently, and 30 pounds occasionally. Able to *carry* up to 30 pounds frequently, and 30 pounds occasionally. Able to push and pull objects weighing up to 30 pounds. Able to exhibit full range of motion for shoulder external rotation and internal rotation. Able to exhibit full range of motion for shoulder abduction and adduction. Able to exhibit full range of motion for elbow flexion and extension. Able to exhibit full range of motion for shoulder extension and flexion. Able to exhibit full range of motion for back lateral flexion. Able to exhibit full range of motion for hip flexion and extension. Able to exhibit full range of motion for knee flexion. Able to demonstrate manual dexterity necessary to operate a computer and other classroom equipment in a safe and efficient manner. (note: will vary based on particular duties of position, example Physical Education, Home Economics, Shop classes, etc)

**ANTELOPE VALLEY UNION HIGH SCHOOL DISTRICT
CERTIFICATED EMPLOYMENT APPLICATION**

Last Name	First Name	Middle Name	Other Name
Current Address Street	City, State, Zip		Phone
Permanent Address Street	City, State, Zip		Phone
Social Security Number: _____ - _____ - _____ Disclosure of your social security number on this form is voluntary. If employment is offered to you, it will be necessary that you provide your social security card for income tax reporting, social security withholding, and personnel and payroll record keeping purposes.	<input type="checkbox"/> NO <input type="checkbox"/> YES Have you ever been convicted of a crime? If yes, please attach a signed and dated statement disclosing full information including dates, location and complete conviction history. <input type="checkbox"/> NO <input type="checkbox"/> YES Has your credential ever been suspended or revoked? Explain. <input type="checkbox"/> NO <input type="checkbox"/> YES Have you ever been dismissed or asked to resign from any job? If yes, explain in writing the circumstances on a signed and dated sheet and attach it to this form. Include all employment information on the back of this application. <input type="checkbox"/> NO <input type="checkbox"/> YES Have you ever worked for the Antelope Valley Union High School District in any capacity? Include all employment information on the back of this application. <input type="checkbox"/> NO <input type="checkbox"/> YES Are you under any contract with any other school, district or county office? If yes, with whom? _____ Contract expiration: _____		
CALIFORNIA CREDENTIALS HELD			
Type: Subject Area: Date of Expiration:	Type: Subject Area: Date of Expiration:	Type: Subject Area: Date of Expiration:	
OUT OF STATE CREDENTIALS HELD			
Type: Subject Area: Date of Expiration:	Type: Subject Area: Date of Expiration:	Type: Subject Area: Date of Expiration:	
Name of California Teaching Credential Applied for:		Date of Application:	
Are you currently enrolled in a Credential Program? <input type="checkbox"/> NO <input type="checkbox"/> YES If yes, list school name and scheduled completion date: _____			
Have you completed NO CHILD LEFT BEHIND (NCLB) Requirements? <input type="checkbox"/> NO <input type="checkbox"/> YES _____ Subject Matter Competent? <input type="checkbox"/> NO <input type="checkbox"/> YES CSET? exam title & date completed _____ PRAXIS? list state, exam title, and date completed: _____ HOUSSE? <input type="checkbox"/> NO <input type="checkbox"/> YES Comments _____			
Have you taken and passed Basic Skills Exam? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, have you ever had a CBEST Waiver? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you now, or ever been, a member of: California State Teachers Retirement System (CalSTRS) <input type="checkbox"/> NO <input type="checkbox"/> YES California Public Employees Retirement System (CalPERS) <input type="checkbox"/> NO <input type="checkbox"/> YES	Do you speak any languages other than English? <input type="checkbox"/> NO <input type="checkbox"/> YES (please list)	
Is there any reason you would be unable to safely perform any of the duties or positions for which you have applied as set forth in the job description for this position with or without reasonable accommodations? <input type="checkbox"/> NO <input type="checkbox"/> YES, please explain: _____			
COLLEGE/UNIVERSITY EDUCATION			
INSTITUTION: _____ FROM: ____/____/____ TO: ____/____/____			
GRADUATED? DATE: _____ DEGREE _____ MAJOR : _____ MINOR: _____			
STREET, CITY, STATE, ZIP: _____			
INSTITUTION: _____ FROM: ____/____/____ TO: ____/____/____			
GRADUATED? DATE: _____ DEGREE _____ MAJOR : _____ MINOR: _____			
STREET, CITY, STATE, ZIP: _____			
INSTITUTION: _____ FROM: ____/____/____ TO: ____/____/____			
GRADUATED? DATE: _____ DEGREE _____ MAJOR : _____ MINOR: _____			
STREET, CITY, STATE, ZIP: _____			
Semester units of Graduate Work beyond BS or BA? _____ Beyond MA or MS? _____ (1 QUARTER UNIT = 2/3 SEMESTER UNIT)			
Name of placement office where placement files are located: _____		Name filed under: _____	
<i>It is the responsibility of the applicant to forward placement papers.</i>			

TEACHING EXPERIENCE

GRADES/SUBJECTS: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

SCHOOL/DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: _____ REASON FOR LEAVING: _____

GRADES/SUBJECTS: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

SCHOOL/DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

GRADES/SUBJECTS: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

SCHOOL/DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

GRADES/SUBJECTS: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

SCHOOL/DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

GRADES/SUBJECTS: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

SCHOOL/DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

NON-TEACHING EXPERIENCE

POSITION/DUTIES: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

COMPANY/EMPLOYER NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

POSITION/DUTIES: _____ FROM: ___ / ___ / ___ TO: ___ / ___ / ___

COMPANY/EMPLOYER NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: : _____ REASON FOR LEAVING: _____

PROFESSIONAL REFERENCES

NAME: _____ OFFICIAL POSITION: _____

SCHOOL DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: _____

NAME: _____ OFFICIAL POSITION: _____

SCHOOL DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: _____

NAME: _____ OFFICIAL POSITION: _____

SCHOOL DISTRICT NAME: _____ PHONE: (____) _____ - _____

STREET, CITY, STATE, ZIP: _____

POSITIONS APPLIED FOR: _____

Please submit any additional comments if you believe they will be valuable in helping AVUHSD determine your qualifications.

I HEREBY CERTIFY that all statements made herein or contained in any materials submitted by me are true and correct to the best of my knowledge and I authorize the full investigation of all information contained therein. I understand that falsification or omission of any matters or information on this application and attached material, or failure to pass fingerprint clearance or any other clearance for the position, or failure to obtain and maintain any required certification as needed for this position will be sufficient cause for termination. I agree that if employed, I will abide by all policies and procedures established by the Administration.

PRINT DOCUMENT AND PROVIDE ORIGINAL SIGNATURES AND DATE

Signature: _____ **Date:** _____

ANTELOPE VALLEY UNION HIGH SCHOOL DISTRICT

44811 SIERRA HIGHWAY LANCASTER, CA 93534

(661) 948-7655

Authorization for Drug/Substance Use Screening

Offers of employment of the Antelope Valley Union High School District are contingent upon successful completion of a required pre-placement Drug/Substance Use test and any other pre-placement physical examination required of the position. If offered employment, it is the employee's responsibility to provide verification of freedom from tuberculosis via a Mantoux TB Test/chest x-ray every four years.

APPLICANT READ AND SIGN:

I, _____, consent to submit to a Drug/Substance Use Screening and/or any other physical exam required for initial and continued employment with the Antelope Valley Union High School District and authorize the facility conducting the screening and/or exam to release said results to the Antelope Valley Union High School District. I hereby certify that I have no previous medical history or disability which would prevent me from performing the physical requirements for the position of _____.

print name

print job title

I understand that any false statement or material omission by me in connection with my physical abilities or medical history will disqualify me from employment or be cause for dismissal.

SIGNATURE: _____ DATE: _____

ANTELOPE VALLEY UNION HIGH SCHOOL DISTRICT

44811 SIERRA HIGHWAY LANCASTER, CA 93534

(661) 948-7655

Authorization for Release of Confidential Information/Hold Harmless

Pursuant to the provision of California Labor Code section 1053,

I, _____
print name hereby expressly authorize any officer, agent, employee, superintendent or manager representing a former employer to respond to any oral or written inquiries regarding my past performance and general character as a former employee.

I further understand and agree that this authorization will permit my former employer to provide any information regarding my performance including, but not limited to , performance or evaluation reports or other related documents maintained for all employees.

I further understand that in signing this authorization for release of confidential information, I expressly waive the provisions of Government Code Section 5254 c. and California Constitution Article I, Section I, relating to privacy and agree to hold my former employer harmless from the release or any information pursuant to this request.

SIGNATURE: _____

DATE: _____