Oxnard Adult School

Oxnard Union High School District
1101 West Second Street
Oxnard, CA 93030.
Phone (805) 385-2578 Fax (805) 385-2581

PERSONAL

Date _____

Name _____
Last First Middle Initial

Date Available _____

Present Address _____
No. Street City State Zip

Valid Until _____

Permanent Address _____
No. Street City State Zip

SNN _____

Telephone No.: Home ( ) _____
Area Number

Work ( ) _____
Area Number

Mobile ( ) _____
Area Number

POSITION DESIRED

Teaching areas of interest: Indicate first, second, and third preferences by subject.

First Choice _____
Second Choice _____
Third Choice _____

If you are offered employment, can you provide information regarding your right to work in the U.S.? ☐Yes ☐No
Documentation will be required upon employment. The District only hires persons lawfully entitled to work in the U.S.

CERTIFICATION

A. Do you hold a valid California State Credential? ☐ Yes ☐ No
Type(s) and expiration date(s)

_____

_____

_____

(i.e.: General Secondary, Ryan, Pupil Personnel, Administrative)

B. If "No," have you applied for one? ☐ Yes ☐ No
Types of credentials for which you have applied _____
Have you passed the California Basic Educational Skills Test for Teachers (CBEST)? ☐Yes ☐ No

C. Are credentials registered in Ventura County? ☐ Yes ☐ No
If "No," where are they registered? _____

D. Are credentials listed under another name? ☐ Yes ☐ No Name _____

GENERAL

A. What is your present or last position? _____ Yearly Salary _____
Location _____ Reasons for leaving _____

B. Are you or have you been, a member of the California Teacher's Retirement System?
☐ Yes ☐ No If "yes," have you withdrawn funds? ☐ Yes ☐ No When? _____

C. As an adult, have you ever been convicted of an offense other than a minor traffic violation?
☐ Yes ☐No If "Yes" please explain nature on separate sheet and attach.

D. Has your credential ever been suspended or revoked? ☐ Yes ☐No If so, attach explanation.

E. Have you ever been dismissed or asked to resign from any teaching and/or administrative position? ☐ Yes ☐ No
If so, attach explanation.

EDUCATIONAL AND PROFESSIONAL TRAINING

	School or Institution Name And Location	Subjects		Graduation		Semester Units
		Major	Minor	Degree	Dates	
High School						
College/Univ.						
College/Univ.						
Graduate Work						

TEACHING EXPERIENCE

(If other than fulltime experience, list student and/or substitute teaching)

List all paid experience (most recent first): include public and private schools, colleges and universities.

Name of District and Schools	City and State	Telephone Area No.	Grades, subjects, position (Note if substitute)	Inclusive Dates		Total Months	Annual Salary
				From	To		

OTHER VOCATIONAL EXPERIENCE

Report all non-teaching employment that you have had since leaving high school as well as any special training which you believe will contribute to your success. Include military or alternative service, if applicable.

Position	Employer	Address No. Street City State	Telephone Area No.	Type of Work	Dates		No. of Months Employed
					From	To	

PERSONAL STATEMENT

Please write (not type) a brief statement in regard to your training and experience with adults which you feel with permit us to make the best evaluation of your application and you.

_____

_____

_____

_____

_____

CERTIFICATE OF APPLICANT

I certify that all statements made in this application are true and complete to the best of my knowlege. I understand that any false statements of material facts will subject me to disqualification or dismissal.

Signature _____ Date: _____

File will not be considered complete without Placement File, complete transcripts, and credential information/copies.
Candidate is responsible for providing these records.

EQUAL OPPORTUNITY EMPLOYER

The Oxnard Union High School District is an Equal Opportunity Employer, marital status, ancestry, age over 40, physical mental or learning disability, Vietnam era veteran status, actual, or perceived sexual orientation.

APPLICATIONS WILL BE KEPT ON FILE FOR A PERIOD OF TWO (2) YEARS