



NACHES VALLEY SCHOOL DISTRICT JT. #3

24 Shafer Ave. — PO Box 99

Naches, WA 98937-0099

(509) 653-2220 — FAX (509) 653-1211

www.naches.wednet.edu

APPLICATION FOR EXTRA CURRICULAR / ACTIVITIES POSITION

Name _____ Social Security # _____

Mailing Address _____

Telephone Number _____ City _____ State _____ Zip _____

Position Desired _____

Washington State Teaching Certificate #: _____

Major _____ Minor _____

What extracurricular duties are you able and willing to handle? _____

EDUCATION

Name of School _____ Dates of Attendance _____ Year Graduated _____

High School: _____

College or University _____

EXPERIENCE AND BACKGROUND: List those things which qualify you for the position desired; please feel free to attach resume or additional pages.

REFERENCES: Give four references who have first-hand knowledge of you; include at least two former employers.

Name _____ **Address** _____ **Phone** _____ **Official Position** _____

 _____
Date

 _____
Signature of Applicant

PERSONAL DATA

(The following information is voluntary only and will be used for Affirmative Action.)

Present Age _____ Number of Children _____
Marital Status _____ Ages of Children _____

For Office Use Only:
Volunteer Clear: _____
Fingerprinting Clear: _____
Copies sent to: _____
Date sent: _____