



Sulphur Springs School District
 27000 Weyerhaeuser Way, Santa Clarita, CA 91351
 Phone - (661) 252-5131 Fax - (661) 252-3589
www.sssd.k12.ca.us

School Nurse Services Employment Application

Instructions: Complete this application carefully (type or print neatly) as it is the basis of our initial screening. All completed applications must be submitted with a Letter of Intent, current resume, three (3) recent letters of recommendation, and copies of all credential(s) held and a valid Registered Nurse License issued by the State of California.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Credential(s) & Registered Nurse License Information

Please list all CA credentials you hold or have applied for:
 _____ Expires _____
 _____ Expires _____

If you hold out-of-state credential(s), have you started the process for CA credential(s) YES _____ NO _____

Has your services credential ever been suspended or revoked? Yes _____ No _____
 If yes, explain in writing the circumstances and attach statement to application.

Registered Nurse License document number _____ Expiration Date _____

Have you ever been dismissed or ask to resign from a nursing position? Yes _____ No _____
 If yes, explain in writing the circumstances and attach statement to application.

Additional Information

Where or from whom did you hear about this position _____

Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodations: Yes _____ No _____
 If necessary, please describe what type(s) of reasonable accommodations are needed: _____

If hired, can you present proof of your legal right to live and work in this country? Yes _____ No _____

Have you ever worked for the Sulphur Springs School District? Yes No If yes, when? _____

Have you been a member of STRS/PERS Yes _____ No _____ If yes, which retirement _____

Have you ever been arrested, charged or convicted of a criminal offense other than a minor traffic violation?

Yes _____ No _____

If yes, state the nature of the crime(s), when and where convicted and disposition of case: _____

NOTE: No applicant will be denied employment solely on the grounds of a criminal offense. The nature and date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however be considered.

Education

College or University Education:

Name and location of each institution attended:	Date Attended	Major	Degree Awarded
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you speak, write or understand any language other than English? Yes No

If yes, which language(s)? _____

Previous Employment

List below all present and past employment, starting with your most recent employer. If no experience in a paid status, you may include volunteer work experience. Account for all time during the past five years, including periods of unemployment. Please use a separate sheet if needed. Do not indicate "see resume."

Employer: _____ Supervisor: _____

Address: _____

Phone: _____ Job Title: _____ From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

.....

Employer: _____ Supervisor: _____

Address: _____

Phone: _____ Job Title: _____ From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

.....

Employer: _____ Supervisor: _____

Address: _____

Phone: _____ Job Title: _____ From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

Professional References

Please list three (3) persons who have first hand knowledge of your work performance within the last two (2) years.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Sulphur Springs School District Referrals

If referred by an SSSD Certificated Employee, please state their name and location.

Teacher Name: _____ Location: _____

Teacher Name: _____ Location: _____

Special Experience/Supplementary Information

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Disclaimer and Signature

This application is submitted with the understanding that I must possess valid California Teaching credential(s).

Furthermore, I am willing to furnish the District with the following items: Transcript(s) of college work and verification of school nursing experience (if applicable).

By signing this application I certify that all the facts set forth in the application are true and complete. I understand that before the District can employ me, I must submit fingerprints for purposes of a criminal background investigation, verification of my eligibility to work in the United States, and proof of freedom from

lung infection (dated that within the 6-month period prior to the date of my employment in the District). I understand that any misrepresentation, falsification or material omission on this application form may result in my failure to receive an offer or, if I am hired, my immediate dismissal from employment.

Signature: _____ Date: _____

The Sulphur Springs School District is an equal opportunity employer and does not discriminate on the basis of the person's actual or perceived race, religious creed, color, national origin, ancestry, age, pregnancy, physical disability, mental disability, medical condition, genetic information, veteran status, gender, gender identity, gender expression, marital status, sex, or sexual orientation.