

Soap Lake School District  
410 Ginkgo St S  
Soap Lake WA 98851  
509.246.1822 – 509.246.0669 Fax

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**Dear Applicant:**

Thank you for your interest in the Soap Lake School District. Enclosed are your application materials. Please read them carefully. Once your application and other required documents have been received by the District Office, your file will be reviewed. **Applications will be kept on file for a period of one year, unless renewed at the request of the applicant.**

Position openings are posted at our web site: [www.slschools.org](http://www.slschools.org) and at each school building. Call the District Office as instructed to indicate your interest in being considered for a posted position. Your file will be screened to determine if you are eligible for an interview. You are encouraged to contact the District Office (509) 246-1822 to inquire about the status of your application and/or any open position for which you apply.

As a reminder, the following documents are required to complete your application:

1. **Classified Employment Application Form.**
2. **General Cover Letter** stating your qualifications for the type of positions in which you are interested.
3. **Response to Application Questions (Corresponding Insert for position(s) in which you are applying).**
4. **Applicant Disclosure Statement (Insert B).** This form must be completed by all applicants. (Provide original signature on each copy submitted to selected districts as checked on the front of the application).

When an offer of employment is made, new employees who will or may have unsupervised access to children, developmentally disabled persons, or vulnerable adults must complete a background check for criminal history, including a fingerprint check, by the Washington State Patrol (WSP) and the Federal Bureau of Investigation (FBI), as well as a current written disclosure of specified criminal convictions and civil or disciplinary board findings. Any offer of employment is conditional upon the successful outcome of the criminal history background check and approval by the District's Board of Directors.

If you have further questions, please call our office at (509) 246-1822.

<p><b>Only <u>Complete Application</u> Packets will be considered.</b></p>
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# SOAP LAKE SCHOOL DISTRICT No. 156

410 GINKGO ST S. SOAP LAKE WA 98851  
(509) 246-1822 FAX (509) 246-0669  
AN EQUAL OPPORTUNITY EMPLOYER

## CLASSIFIED APPLICATION FOR EMPLOYMENT

Social Security Number: 

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 - - Date of Birth 

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Name: \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
(mailing)  
City State Zip

Phone: \_\_\_\_\_ Message Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

## POSITION(S) FOR WHICH YOU ARE APPLYING

- |                                       |   |   |
|---------------------------------------|---|---|
| <input type="checkbox"/> Clerical     | <input type="checkbox"/> Maintenance            | <input type="checkbox"/> Summer School Aide |
| <input type="checkbox"/> Food Service | <input type="checkbox"/> Custodial              | <input type="checkbox"/> Other/Job _____    |
| <input type="checkbox"/> Bus Driver   | <input type="checkbox"/> Professional/Technical | _____                                       |
| <input type="checkbox"/> Grounds      | <input type="checkbox"/> Paraeducator           | _____                                       |

Present Employment Status: \_\_\_\_\_  
EMPLOYER POSITION

Have you ever been employed by the Soap Lake School District? Y N

If yes, Date & Position \_\_\_\_\_

## EDUCATION/TRAINING

	High School	Vocational/ Training/School	Undergraduate College/University	Graduate/Professional
School Name/Location				
Years Completed (Circle Last Year)	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree & Year of Graduation	N/A			
Dates Attended	N/A			
Course of Study	N/A			
	DATE	WHERE	WHEN	WHAT
Degrees any specialized training or apprenticeship.				

District Office Use Only Fingerprint on file? \_\_\_\_\_ Background check date: \_\_\_\_\_

Describe any honors you have received.

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### Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

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### Activities

List professional, trade, business, civic or educational related activities and offices held. (You may exclude memberships which reveal race, gender, creed, color, national origin, age or disabilities.)

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**References: Give references, including supervisors, under whom you have served to be contacted to provide firsthand knowledge of you abilities.**

NAME	ADDRESS	PHONE	POSITION

**Employment Experience (Please do not write "See Resume." Answer all sections completely.)**

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1. Employer		Dates Employed		Duties Performed	
		Month/Year		<input type="checkbox"/> Paid <input type="checkbox"/> Volunteer	
Address		From:			
		To:			
Phone		Hourly Rate / Salary			
		Starting Final			
Job Title	Full Time <input type="checkbox"/>				
	Part Time <input type="checkbox"/>	\$	\$		
Supervisor	Reason for leaving	Number of employees in			
		Organization:			

2. Employer		Dates Employed		Duties Performed	
		Month/Year		<input type="checkbox"/> Paid <input type="checkbox"/> Volunteer	
Address		From:			
		To:			
Phone		Hourly Rate / Salary			
		Starting Final			
Job Title	Full Time <input type="checkbox"/>				
	Part Time <input type="checkbox"/>	\$	\$		
Supervisor	Reason for leaving	Number of employees in			
		Organization:			

3. Employer		Dates Employed		Duties Performed	
		Month/Year		<input type="checkbox"/> Paid <input type="checkbox"/> Volunteer	
Address		From:			
		To:			
Phone		Hourly Rate / Salary			
		Starting Final			
Job Title	Full Time <input type="checkbox"/>				
	Part Time <input type="checkbox"/>	\$	\$		
Supervisor	Reason for leaving	Number of employees in			
		Organization:			

4. Employer		Dates Employed		Duties Performed	
		Month/Year		<input type="checkbox"/> Paid <input type="checkbox"/> Volunteer	
Address		From:			
		To:			
Phone		Hourly Rate / Salary			
		Starting Final			
Job Title	Full Time <input type="checkbox"/>				
	Part Time <input type="checkbox"/>	\$	\$		
Supervisor	Reason for leaving	Number of employees in			
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## **QUESTIONS AND ANSWERS**

### **THE CLASSIFIED EMPLOYMENT APPLICATION PROCESS**

As a service to our applicants, we have provided a list of the most commonly asked questions and our responses.

**Question: May I apply for more than one position?**

*Answer: Certainly. You may apply for any open position for which you feel qualified and for which you are interested.*

**Question: How can I find out about open positions?**

*Answer: We post positions in each building as well as in the District Office. You can also call the District Office to inquire about open positions or visit our website at [www.slschools.org](http://www.slschools.org).*

**Question: How long is my application kept on file?**

*Answer: We will keep your application on file for one year. It is your responsibility to contact the District Office to request that your application remain in active status after a year, if so desired.*

**Question: If I apply for a position and another similar position occurs after I apply, will I automatically be considered for that position as well?**

*Answer: No. You will need to let us know that you are interested in each open position by contacting the District Office.*

**Question: Do I need to come in every time I want to apply for a position?**

*Answer: You do not have to come to the District Office, but you must have a complete application on file, and contact our office by phone or letter.*

**Question: How can I tell when a position closes?**

*Answer: The closing date is listed on the job posting.*

**Question: When do you post your open positions?**

*Answer: We post newly opened positions as they occur.*

**Question: What kind of qualifications do I need to work in the Soap Lake School District?**

*Answer: Each position posting has a list of preferred and/or required qualifications needed to be eligible for that specific position.*

**Question: What if I need an accommodation to complete these materials or to perform the job functions?**

*Answer: To request accommodation during the process, contact the District Office for assistance.*

**Question: How will I be notified regarding an interview?**

*Answer: You will be notified by telephone or letter within approximately a week after the closing date if you have been selected for an interview.*

**Question: Will I be able to work in a smoke-free environment?**

*Answer: Yes. Our District complies with Washington State law, which prohibits the use of tobacco on any District property. We are committed to providing a tobacco-free environment for all. We also are committed to providing a safe environment, both weapon & drug free.*

**Question: Do I need to be a citizen of the United States?**

*Answer: In accordance with the Immigration Reform and Control Act of 1986 (Title 8, US Cod, Section 1.324A), we will hire only United States citizens and aliens lawfully authorized to work in the United States.*

**INSERT A**

**OPTIONAL CONFIDENTIAL DATA FORM**

Soap Lake School District complies with all State and Federal rules and regulations and does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity disability, or the use of a trained dog guide or service animal and provides equal access to designated youth groups. Inquiries regarding compliance and/or grievance procedures may be directed to the School District's Title IX/RCW 28A.640 officer, and/or Section 504/ADA Coordinator, both at 410 Ginkgo Street South, Soap Lake, WA 98851 (509) 246-1822. This District is an equal opportunity employer, supports the spirit, policies and practices of affirmative action, and has implemented programs to address the diversity of its workforce.

Your response to the following questions will assist the District in accurately reporting their employment practices to state and federal agencies and complying with their affirmative action plan. Providing this information is strictly voluntary and it shall be maintained as confidential. The completed data form will be separated from other application materials and will not be reviewed by or available to those involved in the hiring process. The data form will be kept separate from other records relating to applicants, and data on protected status shall not be recorded on any record that is kept in the applicant's pre-employment file.

**PRINT NAME:** \_\_\_\_\_  
Last First MI.

**Sex:** M / F      **Age:** \_\_\_\_\_      **Disabled?:** Y / N

**I consider myself a member of the following ethnic group:**

- Asian or Pacific Islander       Black       Hispanic American
- Caucasian       Native American Indian/Alaskan Native\*

\*If you have identified yourself as Native American Indian/Alaskan Native, please answer the following questions:

I am affiliated with the \_\_\_\_\_ Tribe.  
 I am an enrolled member of this tribe.    YES       NO

**DISABLED AND VIETNAM-ERA AFFIRMATIVE ACTION PROGRAM**

- A. **Veteran:** I am a Veteran of the United States Armed Services. Y / N
- B. **Vietnam-Era Veteran:** The term "Vietnam-Era Veteran" means a person who, 1) served on active duty for a period of more than 180 days, any part of which occurred during August 5, 1964 through May 7, 1975 and was discharged or released there from with other than a dishonorable discharge, or 2) was discharged or released from active duty for a service-connected disability if any part of such active duty was performed during the Vietnam Era.

**I meet the definition provided for "Vietnam-Era Veteran"   Y / N**

- C. **Disabled Veteran:** The term "Disabled Veteran" means a person entitled to disability compensation under laws Administered by the Veteran's Administration for a disability rated at 30 percent or more, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

**I meet the definition provided for "Disabled Veteran"      Y / N**

**How did you learn about our School District and/or this position?**

- Walk In     Advertisement     Job Posting     Newspaper     Placement Center  
 Recruitment/Job Fair    Referred by:    Friend     Other

**INSERT B**

**APPLICANT' DISCLOSURE STATEMENT**

(Reference RCW 28.A.400, RCW 3.43)

Please complete the following questions and sign the declaration. Any falsification or deliberate misrepresentation, including omission of a material fact, or failure to complete any part of your application or this questionnaire can be grounds for denial of employment or continued employment with the district(s) to which you have applied.

**ALL REQUIRED DOCUMENTATION REQUESTED BELOW MUST ACCOMPANY THIS FORM. ALL QUESTIONS MUST BE ANSWERED. IF ADDITIONAL SPACE IS NEEDED, ATTACH A SEPARATE SHEET OF PAPER.**

**EMPLOYMENT HISTORY DISCLOSURE**

1. Are you a former employee of our District?  No  Yes

If yes, please list dates and positions:

\_\_\_\_\_

\_\_\_\_\_

2. Have you ever been on a plan of improvement or placed on probation in any position?

No  Yes

3. Have you ever been placed on administrative leave pending investigation of allegations of misconduct?

No  Yes

4. Have you ever resigned or otherwise separated from any employment (inclusive of regular or extra-curricular positions)?  No  Yes

5. Have you ever been discharged from any employment ( inclusive of regular or extracurricular positions)?

No  Yes

6. Have you ever been disciplined for misconduct by a past or present employer?  No  Yes

7. If you answered YES to questions 3, 4, 5, 6, 7, or 8, provide an explanation of the circumstances, including the underlying facts, place, date, and outcome. Attach an additional page if needed.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<sup>1</sup>All prospective employees who will or may have unsupervised access to children under 16 years of age, developmentally disabled persons, and/or vulnerable adults are "applicants".

**INSERT B**

**APPLICANT DISCLOSURE STATEMENT**

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An inquire my be made to the Washington State Patrol, a Federal, or other Law enforcement agency to verify your responses to the above inquiries. A copy of any response received pursuant to such inquiry will be made available to you upon request.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Applicant, Print Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date and Place: \_\_\_\_\_

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***TO BE COMPLETED AFTER CONDITIONAL EMPLOYMENT IS OFFERED.***

I certify under penalty of perjury under the laws of the State of Washington that as of this date   /  /  , a date on or after which I have been offered conditional employment with Soap Lake School district, the foregoing remains true and correct. I further certify that I have been released from all contracutal obligations with other Washington State School Districts. I understand that any falsification or deliberate misrepresentation, including omission of a material fact or failure to complete any part of my application or this questionnaire can be grounds for denial of employment or continued employment with the Soap Lake School District.

*Your signature must be witnessed by an employee of the Soap Lake School District.*

Print Name: \_\_\_\_\_

Sign Name: \_\_\_\_\_

Witness, Print Name/Title: \_\_\_\_\_

Witness, Sign Name: \_\_\_\_\_

Date and Place: \_\_\_\_\_





MAINTENANCE, GROUNDS, CUSTODIAL & TRANSPORTATION

NAME

LAST

FIRST

MI.

List position desired: \_\_\_\_\_

Do you currently hold a first aid card? Y / N      CPR Card? Y / N

If not, have you ever had first aid training? Y / N

List any trade cards/licenses or certifications you hold: \_\_\_\_\_

Note: Maintenance, Grounds and Transportation applicants are required to complete the following questions: 

Do you have a current Washington State Driver's License? \_\_\_\_\_

List all restrictions placed on your driving record as found on your driver's license.

\_\_\_\_\_  
\_\_\_\_\_

List any traffic citations for moving violations you have had in the past five (5) years.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had your license revoked?       NO       YES

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Check the box(es) below and explain on a separate sheet if you have been convicted of:

DUI       Negligent Driving       Reckless Driving

What experience have you had driving a truck or bus? \_\_\_\_\_ Years      \_\_\_\_\_ Miles

If you have experience as a bus driver, truck driver, or chauffeur, where were you employed?

\_\_\_\_\_  
\_\_\_\_\_

List other driving experience here: \_\_\_\_\_

\_\_\_\_\_

Do you have a current driver's license endorsement for driving school buses? \_\_\_\_\_



**Soap Lake School District No. 156**

**APPLICATION INSERT**

**MAINTENANCE, GROUNDS, CUSTODIAL & TRANSPORTATION**

Please indicate the number of years of experience you have with the following

<b>Job/Function</b>	<b>No. of Years</b>	<b>Job Title/Function</b>
Alarms, Intercoms, Clock Systems		
Automotive Mechanic (Garage)		
Boiler Operation/Repair		
Building Control Systems		
Carpenter		
Commercial Truck/Utility Driver		
Computer Technician		
Custodial		
Custodial Equipment Repair		
Electrician		
Glazier		
Grounds Equipment Repair		
Grounds Keeper		
Heating & Ventilation (HVAC)		
Locksmith		
Mechanic-Large Fleet Vehicles		
Mechanic-Small Fleet Vehicles		
Metal Worker (welding)		
Painter		
Plumber		
Roof Repairs and Maintenance		
Utility Driver		
Warehouse		
Other		

Have you served in a supervisory capacity in any of the above job functions?  Yes  No

How many employees did you supervise? \_\_\_\_\_

If yes, please describe responsibilities: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What do you consider an acceptable standard for dependability, punctuality, neatness, and work quality?  
 \_\_\_\_\_  
 \_\_\_\_\_

What actions do you plan to take to ensure your continued professional growth? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Describe what steps you take to develop appropriate working relationships with others? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Transportation applicants will be required to obtain a physical examination, a Class B driving permit with airbrake and passenger endorsements, a current first aid card and a copy of their personal driving record from the Washington State Department of Licensing.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**Soap Lake School District No. 156  
APPLICATION INSERT  
SECRETARIAL/CLERICAL**

**NAME:** \_\_\_\_\_  
   Last  First  Middle

- List position(s) desired: \_\_\_\_\_
- Do you currently hold a first aid card? \_\_\_\_\_ CPR Card? \_\_\_\_\_  
 If not, have you ever had first aid training? \_\_\_\_\_ How recently? \_\_\_\_\_

**TRAINING AND EXPERIENCE**

<i>Technical Skill</i>	<i>Years of Experience</i>	<i>Indicate Specifics or Skill Level</i>
Typing/Keyboarding		WPM _____
Shorthand		WPM _____
Speed writing		WPM _____
Dictaphone		Manufacturer(s)/Model(s):
Accounting/Bookkeeping		<input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Calculator/10-key		<input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Receptionist		<input type="checkbox"/> Telephone <input type="checkbox"/> In-person
Filing		
Duplication/Copying		Manufacturer(s)/Modes(s):
Other Office Machinery		Manufacturer(s)/Modes(s):
Office Management		
Correspondence Composition		<input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced

**PERSONAL COMPUTER**

Word Processing		Program(s): <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Spreadsheets		Program(s): <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Databases		Program(s): <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced
Desktop Publishing		Program(s): <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced

(Over)



Soap Lake School District No. 156  
APPLICATION INSERT  
SECRETARIAL/CLERICAL

**EXPERIENCE WITH CHILDREN**

- You may include volunteer work.

<i>Organization Name/ Organization/Address</i>	<i>Dates of Service Mo/Yr to Mo/Yr</i>	<i>Position Title</i>	<i>Job Functions</i>

- Indicate any training you have received to enhance your work with school-aged children.

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- Please list any other training or experience that is relevant to the position for which you are applying.

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- What do you consider an acceptable standard for dependability, punctuality, neatness, accuracy, and work quality?

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- What actions do you plan to take to ensure your continued professional growth?

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- Describe what steps you take to develop appropriate working relationships with others?

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**Applicant Signature:**

**Date:**

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Soap Lake School District No. 156  
APPLICATION INSERT  
FOOD SERVICES

NAME

LAST

FIRST

MI.

List position desired:

Cook

Assistant Cook

Substitute

Do you currently hold a first aid card? Y / N

CPR Card? Y / N

If not, have you ever had first aid training? Y / N

Do you hold a valid Food Handler's Permit? Y / N

**CAFETERIA - COOKING TRAINING AND EXPERIENCE**

What cooking training and/or experience have you had?

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What experience have you had in institutional/volume cooking?

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What training and/or experience have you had in ordering supplies?

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What training and/or experience have you had in taking inventory?

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Describe what steps you take to develop appropriate working relationships with others.

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Other pertinent experience and/or training?

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**APPLICATION INSERT  
FOOD SERVICES**

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What do you consider an acceptable standard for dependability, punctuality, neatness, and work quality?

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What actions do you plan to take to ensure your continued professional growth?

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**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# SOAP LAKE SCHOOL DISTRICT NO. 156

## INSERT FOR CLASSIFIED SUBSTITUTE POSITIONS

*Please check boxes to indicate the position(s) in which you are interested.*

<input type="checkbox"/>	Bus Driver	<input type="checkbox"/>	Food Service
<input type="checkbox"/>	Clerical	<input type="checkbox"/>	Para educator
<input type="checkbox"/>	Custodian	<input type="checkbox"/>	

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_ MESSAGE PHONE \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

\_\_\_\_\_ I wish to be a substitute in positions listed above in the Soap Lake School District

\_\_\_\_\_ I wish to accept the following assignments only (please list)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

Before you will be called as a substitute in any area, you must have a complete application for employment on file at the District Office.

**Applications will remain in active status for a period of one year unless renewed  
at the request of the applicant.**

**CERTIFICATION, AUTHORIZATION AND  
RELEASE**

My signature below authorizes the school district to conduct a background investigation and authorize the release of information in connection with my application for employment. This investigation may include such information as criminal or civil convictions, driving records, previous employers and references, and other appropriate sources. I waive my right of access to any such information, and with limitation hereby release the school district and the reference source from any liability in connection with its release or use. This release includes sources from specific examples as follows: The Washington State Patrol, information from the convictions, or certification that no data on criminal convictions are maintained, information from SPI, the Washington or other State Department of Social Services Child Protective Services Unit and any locality to which they may refer for release of information pertaining to any findings of child abuse or neglect investigations involving me. Furthermore, I certify that I have made true, correct, and complete answers and statements on this application in the knowledge that they may be relied upon in considering my application. I understand that any omission and/or falsely answered statements 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 the Soap Lake School District.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**THE SOAP LAKE SCHOOL DISTRICT IS AN  
EQUAL OPPORTUNITY EMPLOYER**

Soap Lake School District complies with all State and Federal rules and regulations and does not discriminate in any programs or activities on the basis of sex, race, creed, religion, color, national origin, age, veteran or military status, sexual orientation, gender expression or identity disability, or the use of a trained dog guide or service animal and provides equal access to designated youth groups. Inquiries regarding compliance and/or grievance procedures may be directed to the School District's Title IX/RCW 28A.640 officer, and/or Section 504/ADA Coordinator, both at 410 Ginkgo Street South, Soap Lake, WA 98851 (509) 246-1822. This District is an equal opportunity employer, supports the spirit, policies and practices of affirmative action, and has implemented programs to address the diversity of its workforce.

Questions regarding this application can be directed to:

**Soap Lake School District No. 156**  
District Office  
410 Ginkgo St S  
Soap Lake WA 98851

(509) 246-1822

**GENERAL INFORMATION**

- When job openings occur, completed applications will be reviewed by the administration and interviews scheduled at the invitation of the Soap Lake School District.
- Applicant's selected for an interview will be notified by the Superintendent's Office.
- When applicable, tests may be administered before or after a personal interview.
- Present or past employers may be contacted as a part of our selection process.
- Employment is contingent upon State Patrol and FBI Fingerprint checks.



## **QUESTIONS AND ANSWERS**

### **THE CLASSIFIED EMPLOYMENT APPLICATION PROCESS**

As a service to our applicants, we have provided a list of the most commonly asked questions and our responses.

**Question: May I apply for more than one position?**

*Answer: Certainly. You may apply for any open position for which you feel qualified and for which you are interested.*

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