

TEACHER INSERT QUESTIONS
(To be attached to Certificated Application Form)

Name: _____ Date: _____
(Last) (First) (Middle)

Indicate grade level addressed in this questionnaire: K-2 3-5 6-8 9-12

Briefly outline your use of appropriate assessment and instructional strategies to meet individual student learning needs. Examples of assessment should be specific to a particular content area.

Please use only one side of the page.

APPLICANT SIGNATURE _____

Bellingham School District is an equal opportunity employer. The District does not discriminate on the basis of race, religion, creed, national origin, age, sex, or disability. The District has implemented an affirmative action program and encourages qualified women and minority applicants to apply.