



Identification

Last Name	First Name	Middle Name
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Street Address	City	State	ZIP Code
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Phone	Message Phone	Email
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Washington State Certification

Certificate	Applied Date	Issued Date	Expiration Date
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Endorsements

Certificate	Applied Date	Issued Date	Expiration Date
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Endorsements

Education

Date	School	City/State	Degree
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GPA	Major	Credits	Minor	Credits
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Date	School	City/State	Degree
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GPA	Major	Credits	Minor	Credits
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Date	School	City/State	Degree
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GPA	Major	Credits	Minor	Credits
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Experience

Contracted Certificated Experience

Start Date	End Date	Grade/Subject	City/State
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School	Principal	Phone
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Start Date	End Date	Grade/Subject	City/State
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School	Principal	Phone
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Start Date	End Date	Grade/Subject	City/State
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School	Principal	Phone
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Student Teaching/Internship

Start	Date End Date	Grade/Subject	City/State
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School	Principal	Phone
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References

Supervisor/Teacher	Position	School
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City/State	Work Phone	Home Phone
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Supervisor/Teacher	Position	School
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City/State	Work Phone	Home Phone
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