

**CALIFORNIA TEACHERS ASSOCIATION
RIF DATA FORM**

NOTE: Please complete the entire questionnaire to ensure that CTA can fully represent you in the layoff procedure. If you are unsure about past training or experience, check your personnel file. Finally, do make sure to type or print legibly.

1. Last Name _____
2. First Name _____
3. Home Address _____
4. Home Phone _____ Cell Phone _____
5. Personal Email Address _____
6. School/Campus _____
7. School/Campus Address _____
8. School Phone Number _____
9. Current Employment Status _____
(K-12: Probationary 1, 2 or Permanent) (CC: Contract 1, 2 or Regular)
10. Seniority Date According to District (if incorrect, explain)

11. Seniority Number _____
12. First Date of Paid Probationary Service _____
 - a. Did you serve at least 75% of the school year immediately prior to receiving probationary status? _____

13. Credentials and Certificates Held that the District Has Been Notified of or Faculty Service Areas (FSAs) in Which Qualified and the Date of the Qualification

14. District employment history. State teaching assignments (subjects and grade levels), classification (permanent, probationary or temporary) and hours worked per week if less than full-time. List your current assignment first.

Dates	Teaching Assignment	Classification	Hours Per Week (If Not Full-Time)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

15. If any employment listed above is other than probationary (contract) or permanent (regular), please explain the basis for your classification.

16. Degrees Held (w/Major & Minor): _____

17. Degrees Anticipated (w/Major & Minor): _____

18. Post Bachelor's Degree Units: _____

19. Please explain any breaks in your service with the district. _____

20. Identify every district certificated employee or faculty member you know of who resigned, was dismissed or otherwise terminated, retired or announced his or her intention to terminate employment during the previous or current school year.

21. Identify every district certificated employee or faculty member who you think may retire or resign effective next school year who has not yet done so.

22. If you know of any person in the district with less seniority than yourself who is being retained to perform services that you are credentialed or qualified by FSA to perform (be sure to check a seniority list that indicates persons not served with layoff notices) state the name of that individual, his or her current position, and the position he or she will hold next year.

23. Do you know why any of the individuals listed in paragraph 22 is being retained? If so, explain why as to each individual:

24. List all positions held on committees, advisory groups and appointed or elected positions within the district.

25. Please provide any other relevant information regarding your qualifications for service.

26. State any other information you think is important to your case.
